

BSU FACILITIES OPERATIONS & MAINTENANCE (FO&M)

Ext: 6-1371

Mail Stop: 1270

Fax No: 6-1892

CONTRACTOR KEY/ACCESS REQUEST

(PLEASE PRINT)

PROJECT # AND NAME _____

CONTRACTOR NAME _____ PHONE # _____

CONTRACTOR'S AUTHORIZED REPRESENTATIVE _____

PROJECT MGR _____ PROJECT START DATE _____ EXPECTED COMPLETION DATE _____

REMEMBER – KEYS ARE A SECURITY ITEM

BUILDING, ROOM, # OF KEYS:

1. _____ 2. _____

3. _____ 4. _____

ELECTRONIC CARD KEY ACCESS NEEDED:

BUILDING _____ DATES _____ TIMES _____

CARD KEY # 1. _____ 2. _____

PROJECT MANAGERS WILL NEED TO MAKE ARRANGEMENTS THROUGH CAMPUS ID TO OBTAIN ID/PROXY CARD FOR CONTRACTOR PRIOR TO GRANTING OF ACCESS

It takes three days to process a key request and make the key(s). When they are ready, the key holder will be contacted at the number provided. A photo ID must be presented at the time the keys are issued.

- *Keys will be issued to Contractors or their authorized representative.*
- *Keys are the responsibility of the Contractor and must be returned at the end of the project.*
- ***Lost or unreturned keys may result in the need to re-key the door/area. Per Boise State University policy, contractor's retainage will be withheld if all keys are not returned at project completion. If keys have not been returned within 30 days of completion, retainage will be used to re-key all doors as necessary to restore security.***

AUTHORIZING SIGNATURE(S):

Contractor's Authorized Representative Date: _____

Senior Project Manager or Associate Director or Director Date: _____

Auxiliary Facility Director (if access to Aux facility needed) Date: _____

RETURN COMPLETED/ORIGINAL SIGNED FORM TO FO&M/ MS 1270