



**KEY REQUEST and CARD ACCESS FORM (SOUTH CAMPUS)  
RESEARCH FACILITY ONE**

**KEY HOLDER INFORMATION**

Tenant Name \_\_\_\_\_

Key Holder Name (please type or print) \_\_\_\_\_

Telephone \_\_\_\_\_ E-Mail: \_\_\_\_\_

Suite / Office / Entrance requesting access to: \_\_\_\_\_

I acknowledge that I am receiving \_\_\_\_\_ key(s) and/or \_\_\_\_\_ access card(s) from Gateway University Research Park, Inc., which provides me access to the above listed area(s). I also acknowledge that this key(s) is loaned to me by Gateway University Research Park for my exclusive use.

This key(s) is non-transferable and subject to recall. For security measures, I agree to immediately notify Gateway University Research Park, ***both verbally and in writing***, in the event the key is lost, stolen or damaged. I further acknowledge that a \$25.00 fee will be assessed for a replacement key(s) in the event this key is lost, stolen, or damaged.

I am aware that all locks at Gateway University Research Park, located at 2901 E Gate City Blvd., participate in a building master lock system so as to allow Gateway personnel access to all areas in the case of an emergency.

Key Holder's Signature \_\_\_\_\_ Date \_\_\_\_\_

Key Number / Access Card # Issued: \_\_\_\_\_

- New Key / Access Card\*
- Lost Key / Access Card (*\$25.00, non-returnable fee will apply*)
- Damaged Key / Access Card (*\$25.00, non-returnable fee will apply*)
- No Longer Employed, Effective Date \_\_\_\_\_

***\*Key requests can generally be processed within 48 hours of receipt.***

***In the event a building master key(s) issued to Tenant (one that opens all entrance doors at 2901 E Gate City Blvd), is lost or stolen, Tenant becomes responsible for all costs associated with subsequent rekeying of all locks and reissuance of keys.***