

Application to Change Ownership of Restricted Key System

(Please note that further information may be required)

Address of System Installation

System Number

(This can be found stamped on any key)

Applicants Name:

Phone Number:

Are you the building owner or tenant?

Business Name:

Short description of your reason for ownership transfer:

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I (Name)..... assure CLASS Locksmiths that I am acting lawfully by applying to have the ownership of this key system transferred and that I am legally entitled and empowered to do so. By signing this application I accept all legal responsibility against any action taken as a result of this application being unlawful.

Signed Dated

CLASS Locksmiths Office Use Only

Existing Signatures On File?	Approved By	New Signatory Form Sent:	Yes / No
None / All Contacted	Date	Fax	Email Post
Comments			