

# Application to Change Ownership of Restricted Key System

(Please note that further information may be required)

**Address of System Installation**

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**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 .....			