KEY/CARD AUTHORIZATION

NORTH DAKOTA HIGHWAY PATROL

SFN 52180 (6/09)

KEY/CARD ISSUE

Department	Door Location or Access Level
Department Head	
Name of Employee	Work Phone Number
Access Device Requested (Check all that Apply) ☐ Metal Key Number _____ ☐ Card Number _____	Employee Signature (Responsible for Key/Card) Issued By / Date Issued
A photo must be submitted to security before a key can be issued.	Approved By / Date Approved

REPLACEMENT KEY/CARD

(The cost to replace a key/card is $5.00)

Date Returned	Returned To
Access Device Replaced (Check all that Apply) ☐ Metal Key Number _____ ☐ Card Number _____	Employee Charged Payment Received Amount _____ Date _____ By _____

RESTRICTED HOURS/DOORS - CARDS ONLY

NOTE: All card holders will be given 24/7 access to exterior doors of the building they work in unless specified otherwise.

Authorized Hours	Authorized Days
Authorized Doors	

Remarks