

- KEY -
AUTHORISATION FORM

RETURN TOP SECTION TO
STORE-SAFE®

Safe Custody Storage Solutions
ABN 80 003 681 105
PO Box 75, Leichhardt NSW 2040

- SYSTEM OWNER -

KEY SYSTEM NUMBER

No _ _ _ _ _

- IMPORTANT -

- WHEN ORDERING SUPPLY KEYS:-
1. SYSTEM NUMBER
2. QUANTITY REQUIRED
3. SIGNATURE AUTHORISATION
4. DELIVERY INSTRUCTIONS

NAME:

ADDRESS:

..... POSTCODE:

PHONE NUMBER:

DATE:

NO FURTHER KEYS ARE TO BE SUPPLIED FOR THE ABOVE REGISTERED KEY SYSTEM EXCEPT AGAINST
WRITTEN AUTHORITY BY **EITHER / ALL OF / ANY TWO OF / OTHER**

NAME:

SIGNATURE: POSITION:

NAME:

SIGNATURE: POSITION:

NAME:

SIGNATURE: POSITION:

WE SHALL ADVISE IN WRITING SHOULD THERE BE ANY VARIATIONS TO THE ABOVE INSTRUCTIONS

KEY SYSTEM NUMBER

No _ _ _ _ _

- IMPORTANT -

- WHEN ORDERING SUPPLY KEYS:-
1. SYSTEM NUMBER
2. QUANTITY REQUIRED
3. SIGNATURE AUTHORISATION
4. DELIVERY INSTRUCTIONS

- RETAIN THIS COPY FOR YOUR FILE -

DEALER'S NAME: **STORE-SAFE®**

ADDRESS: PO Box 75, Leichhardt NSW 2040

PHONE NUMBER: Phone (02) 9569 2122 fax: (02) 9568 3313

DATE:

CONTACT:

NAME:

SIGNATURE: POSITION:

NAME:

SIGNATURE: POSITION:

NAME:

SIGNATURE: POSITION:

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