Sample Key Request and Custody Form Policy Template for Employees

Introduction:

This policy promotes agencywide safety and security through effective key management measures. The guidelines outline employee responsibilities, operational procedures, and accountability expectations.

Issuance of Keys:

- Key(s) will be issued for business purposes only and based on an employee's roles and responsibilities.
- Key(s) will only be issued to employees who have completed the **Key Request and Custody Form** included below. The employee must complete the top portion of the form and send it to the *[Name of Responsible Party, i.e., Executive Director]* for issuance approval and signature.
- The signed form will be provided to *[Name of Responsible Party, i.e., Maintenance Manager]* to cut and issue the key(s) to the employee. Stamp each key with a unique code to track inventory.
- Upon receipt of key(s), the employee will sign the bottom portion of the **Key Request and Custody Form** acknowledging they have possession of *[Name of Organization]* key(s).
- The *[Name of Responsible Party, i.e., Human Resources Manager]* will maintain a copy of the completed form in the employee's file.
- The *[Name of Responsible Party, i.e., Department Manager*] will inventory all issued keys. The responsible party may conduct periodic audits to ensure policy compliance and mitigate facility security gaps.

Note: The *[Name of Organization]* utilizes a restricted key system that prevents the unauthorized duplication of keys.

Key Holder Responsibilities:

- Employee shall keep key(s) in their possession and ensure they are always appropriately secured.
- Employee shall return key(s) in the lock box in the maintenance department office at the end of each day. [if applicable and up to the discretion of your organization]
- Employee shall only use their key(s) to access authorized areas for business purposes and to perform the duties of their role.
- Employee shall not give their key(s) to any other party or unlock doors for an unauthorized individual(s).

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- Employee shall report lost or stolen key(s) immediately to their manager. *[Name of Responsible Party, i.e., Deputy Director]* will determine if rekeying is necessary.
- Employees who require a replacement key must submit a request to the *[Name of Responsible Party, i.e., Deputy Director]* as they are the registered user and the only authorized party to obtain duplications. Update the **Key Request and Custody Form** with any key replacement information.

Determine if your organization will hold an employee financially accountable for any replacement key(s).

- Any employee who fails to comply with the above responsibilities or demonstrates negligent behavior relating to key control may be disciplined, including termination of employment.

Key Return Procedures:

- Employee shall return key(s) under any of the following conditions: a) separation of employment, including termination and resignation; b) transfer to a new role within the organization that no longer requires key access; c) per management request.
- Employee shall complete the last portion of the **Key Request and Custody Form** indicating that they returned *[Name of Organization]* key(s) in their possession.

Key Request and Custody Form

Key Request

_____ _____

Employee Name Employee Title

Key(s) Requested and Reason: _____

_____

_____

_____

_____ _____

Employee Signature Date

Send to Executive Director for Approval

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Approval

This request has been approved by:

_____

Executive Director

_____ _____

Executive Director Signature Date

Send to Maintenance Director to Cut and Issue Key(s)

Key(s) Issuance

_____has been issues the following key(s) on _____

Employee Name Date

Name of Key	Unique Code

_____ _____

Employee Signature Manager Signature

Maintain Signed Form in Employee File

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Key(s) Returned

Key(s) Returned? ☐ Yes ☐ No

Employee Signature _____ Date _____

Manager Signature _____ Date _____

Replacement Key(s)

The following key(s) has (have) been lost, stolen, or otherwise compromised:

Name of Key	Unique Code

The following replacement key(s) has (have) been issued:

Name of Key	Unique Code

Employee Signature _____ Date _____

Manager Signature _____ Date _____

***This document is for informational purposes only.** Specific policy guidelines will be dependent upon your agency's operational procedures and ultimately up to your discretion. Always consult with legal counsel prior to adopting policies.

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