

# KEY REQUEST FORM

# CONFIRMATION ONLY

★ MANDATORY FIELDS MUST BE COMPLETED - PLEASE PRINT ALL DETAILS CLEARLY & TICK APPROPRIATE BOXES



POWERED BY **API GROUP**

Email: [nzcoderoom@chubbs.com](mailto:nzcoderoom@chubbs.com)

Phone: 0800 20 30 40

★ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

★ Company name \_\_\_\_\_

Site Address \_\_\_\_\_

★ System N°

*Refers to stamping at the top of the key*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

★ KEY NAME

*Refers to stamping below system number*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

★ QUANTITY

*Please word*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



★ TOTAL KEYS REQUESTED = \_\_\_\_\_

*Keys will not be couriered unless a Chubb Lock & Safe account is active*

Company \_\_\_\_\_  
Street address \_\_\_\_\_  
Suburb \_\_\_\_\_  
Attention \_\_\_\_\_  
Phone \_\_\_\_\_  
CITY \_\_\_\_\_

✓ SAME / NEXT DAY COURIER  SUB-60

*Chubb Lock & Safe does not accept any liability for costs incurred as a result of keys being lost by courier.*

## TO COLLECT FROM

- CHUBB WELLINGTON, 10 HUTT ROAD, PETONE
- CHUBB CHRISTCHURCH, 1 WASHINGTON WAY, SYDENHAM
- CHUBB AUCKLAND, 3 FISHER CRESENT, MT WELLINGTON
- TECHNICIAN ON SITE

## PAYMENT DETAILS

- Charge current account \_\_\_\_\_
- with the order number \_\_\_\_\_
- Our company does not have a current account therefore, payment will be made at the time of collection

It is the responsibility of the signatories to notify Chubb Lock & Safe of any alterations to this key system, otherwise this can cause delays in the issue of further keys. If a signatory on file cannot be obtained, then no further keys will be issued until authenticity of title can be established. In the event that Chubb Lock & Safe is not formally notified that the system has been abandoned or has wholly changed ownership, and after attempts to verify ownership have been made; Chubb NZ does not accept liability for the issuing of keys to other parties.

**Authorized signature(s) that match sample signature held by Chubb New Zealand**



*Sign here* ✕ .....

*Sign here* ✕ .....

Sign here if 2 signatures are required

★ Print name \_\_\_\_\_

Print name \_\_\_\_\_

Confirmation that \_\_\_\_\_ received \_\_\_\_\_ key(s) on \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Name please word quantity*