

RESTRICTED KEY REQUEST FORM**ALL FIELDS ARE MANDATORY – Please note payment details must be provided**Return completed form to keys@omegacorp.com.au Date: _____

Key System Number: _____ (this number is engraved on all keys)

Company Name / Individual: _____

Delivery Address: _____

Suburb: _____ Post Code _____

Contact Phone No: _____

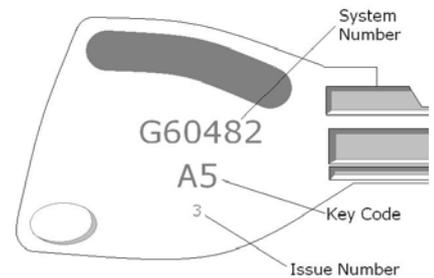
Please supply the following restricted keys to the above Master Key System

Key No: _____ Qty: _____ Key No: _____ Qty: _____

Key No: _____ Qty: _____ Key No: _____ Qty: _____

Delivery Method: Registered Post \$12.50 Express Post \$20.00 Courier: POA Ring When Ready for Collection

Lockwood Gen6

**Payment Type – PAYMENT DETAILS MUST BE PROVIDED** **EFT Payment** - please provide email address and a pro-forma invoice will be sent including banking details

Email : _____

 Credit Card Details: Visa / Master Card Amex Diners

Number: _____ Exp: _____ CCV _____

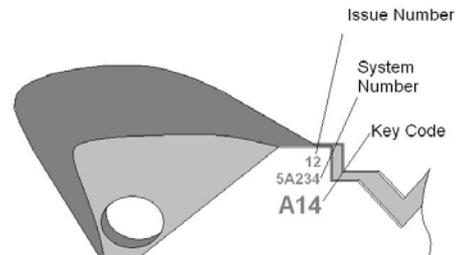
 Cheque - please send a copy of this completed form with cheque **Company Account** –INVOICE TO: Company Account Name: _____

Omega Account Code: _____ Purchase Order # _____

 Invoice to be sent with goods. Invoice to be sent to Company Account holder**Authorisation for Keys to Be Cut**

I hereby certify that I am registered as an authorised signatory for the above Master Key System, and I authorise Omega Security Solutions Pty Ltd to cut the above keys as required.

BI-Lock New Generation

Authorised Signature: _____**Print Name:** _____**Submit Form****Print Form****Reset Form**