

MEDECO RESTRICTED KEY AUTHORIZED SIGNER ADD FORM

CUSTOMERS NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

KEY REFERENCE NUMBER: _____ (STAMPED ON KEY)

I _____ DO HEREBY CERTIFY AND ATTEST THAT I AM AUTHORIZED BY
(CUSTOMERS NAME)
THE **WESTWOOD-BEVERLY HILLS LOCKSMITH** COMPANY TO PLACE ORDERS & CHANGE
AUTHORIZED SIGNERS TO PLACE ORDERS FOR **MEDECO BIAXIAL** KEYS OF A RESTRICTED
NATURE. I FURTHER ASSERT THAT THE PERSONS LISTED BELOW ARE TO BE ADDED TO THE
SIGNATURE FILE TO PLACE SUCH ORDERS OF **MEDECO BIAXIAL** KEYS OF A RESTRICTED
NATURE FOR THE SPECIFIC KEY REFERENCE NUMBER.

I ALSO MAKE THE STATEMENT THAT I HEREBY RELIEVE THE **WESTWOOD-BEVERLY HILLS
LOCKSMITH** COMPANY OF ANY LIABILITY OR CULPABILITY REGARDING THE
MISAPPROPRIATION OF KEYS WITH THE SPECIFIC CODE DESIGNATIONS ASSIGNED TO ME AS
A RESULT OF IMPLEMENTING THIS DOCUMENT.

1. _____
(PERSON BEING ADDED)

2. _____
(PERSON BEING ADDED)

3. _____
(PERSON BEING ADDED)

CUSTOMERS SIGNATURE: _____

DATE: _____

DRIVERS LICNESE OR I.D.# _____