BCIT SECURITY
Safety, Security & Emergency Management

Lost BCIT Keys

This form is to be completed by Security for all reports of lost BCIT keys

Report Date:	
Keys Lost:	
Lost By: **(Employee's Full Name)**	
Work Phone Number:	
Department:	
Manager:	

Keys were last seen:

Keys were lost near:

Security Coordinator advised by telephone   Date: Time:
(Voice Message left if after hours)

Contact BCIT Security Manager AND Security Site Supervisor if the lost keys provide access to high profile areas or areas with significant Institute assets.

Call out to BCIT Security Manager?   Yes [   ]   No [   ]

Comments / Notes:

REPORT WRITTEN BY S/O: _____   **DATE:** _____

SUPERVISOR: _____   **DATE:** _____

Maintenance Activity Report #:   [_____]