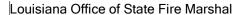
MASTER ELEVATOR KEY ORDER FORM





PART I: Applicant Information [Please print or type]

,	Applic	ant Na	ıme:							
	Addre									
(City:					State:	Zip:			
F	Phone	:			Fax:	-	-			
E	Email:									
1	Mailing	g Addı	ess (if different from abo	ve):						
,	Addre	SS:	· 							
(City:					State:	Zip:			
<u>PART</u>	II: EI	<u>igibili</u> t	¥							
			under Louisiana Rules to	o possess a Master E	Elevator Key b	pased on the follow	lowing qualification	(s) [please check the		
((A)							n with a fire department.		
((B)*		Please provide departm				•	Cniet.		
	 (B)* □ Elevator owner: ownership in a building required to comply with this rule chapter (C)* □ Elevator owner's agent: employment with an owner required to comply with this rule chapter 									
	D)		•	ive license with the L	•		•	company information and		
((E)		State-certified inspector	r: actively licensed a	s an elevator i	inspector by the	Louisiana Division	of Elevators		
((F)		State agency represent purposes. Agency name					elevator for maintenance		
*	NOTE	E: I1	box (B) or (C) is checke	d, please provide a b	building addre	ss below:				
	Buildi	na Ad	dress:							
	Dullul	ng Au						-		
								-		
<u>PART</u>	III: C	ertific	ation [Please provide the	ne appropriate inform	nation, signatu	ires, and approv	als in the space pr	ovided below]		
			mit this application for the ule. I further agree and c		ng Master Ele	vator Keys in ac	cordance with the I	Louisiana State Fire		
	1. 2.	Sho	II not duplicate the elevate buld I become ineligible to possession to the author	o possess a Master I	Elevator Key i	n accordance w		, I will surrender all keys i		
,	Applic	ant's S	Signature:				Date:			
			gency, Organization rtment Name:					_		
			Chief, or ment Head Signature:				Date:			
(Contra	actor L	icense Number:					_		
ŀ	Key O	rder C	uantity:							

NOTE: Please submit a Master Elevator Key Order Form for each key order to one of the Authorized Distributors on the next page. This form does not require submittal to or authorization by the State Fire Marshal's office.

PART IV: Authorized Distributors

Please submit a Master Elevator Key Order Form for each key order to one of the Authorized Distributors below. NOTE: This form does not require submittal to or authorization by the State Fire Marshal's office.

Authorized Distributors for Louisiana Master Elevator Keys Rev. Jan. 1, 201											
Name	Address	City, State	Zip Code	Toll-Free Phone	Phone	Fax					
Locking Systems International	6025 Cinderlane Road	Orlando, FL	32810	800-657-5625	407-298-9895	800-895-0706					
Northeast Lock Corp.	48 Oak Street	Clifton, NJ	07014	800-524-2575	973-777-7509	800-524-2576					
RaLock Company	3750 N. Hwy 67	Midlothian, TX	76065	800-777-6310	972-775-6301	972-775-6316					
Rolland Safe & Lock	1926 Airline Drive	Metairie, LA	70001	800-873-8898	504-835-7233	504-837-5868					
SEES Inc.	2781 McNabb Road	Pompano Beach, FL	33069	800-526-0026	954-971-1115	954-917-7337					