Organisation

Address (optional)

# Key receipt

Reference no. | Place | Date | Time

## Employee

Name | Staff number (optional)

Department / site

## Issued by

Name | Role

## Keys and access media

| Description | Key / fob number | Access area | Qty |
|---|---|---|---|
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## Issue

Date of issue | Start date (optional)


Sample based on German practice, without warranty. Not legal advice for your individual case.

## Acknowledgement

I have received the keys listed above. I will not pass them on to third parties, will not have copies made and will report any loss to the issuing party without delay. When my employment ends, when I move to another area of work or on request, I will return the keys in full.

**Employee**

Signature

Name

Place, date

**Issued by**

Signature

Name

Place, date

## Return

Returned on

All keys returned

◯ Yes ◯ No

Missing keys

Notes

**Returned by**

Signature

Name

Place, date

**Received back by**

Signature

Name

Place, date


Sample based on German practice, without warranty. Not legal advice for your individual case.