



ADDITIONAL KEY/LOST KEY FORM

Date: _____ Tenant Name: _____

Apt #: _____ Phone #: _____

I hereby request an additional key for:

Apartment Door **Front Door (High Rise or Hamilton Fish)** **Mail Box**

Reason for the key request: **Lost Key** **Broken Key** **Additional**

This key will be given to: **Self** or **Other**

Name of Other: _____

Address: _____

Phone #: _____

Is this person a health aid: Yes No

If yes, please provide the employer's name and address:

I understand there will be a charge for additional keys. I authorize the Beacon Housing Authority to charge my account for the cost of replacing the system presently installed if any of the keys given to me are lost, misplaced, reproduced or returned to the Beacon Housing Authority office upon request. The Beacon Housing Authority reserves the right to deny a key request for any reason.

Tenant Signature

Housing Authority Representative Signature

of Keys Received: _____

Date: _____

Tenant Signature

Housing Authority Representative Signature



One Forrestal Heights • Beacon, NY 12508
t: 845.831.1289 • f: 845.831.1370
beaconhousingauthority.org



LOST APARTMENT KEY / ACKNOWLEDGMENT AND RELEASE

I/We, _____, hereby request a duplicate key, which has been lost.

I/We acknowledge that I/We have been advised by Beacon Housing Authority that they recommend the replacement of the lock and have explained the risk of unauthorized entry to the apartment and possible theft or personal injury.

I/We **agree** to have the lock changed for our apartment, # _____ at Forrestal Heights Hamilton Fish Plaza. I/We agree to pay the Housing Authority the fee of **\$50.00** which is my/our responsibility.

Tenant Signature Date

Tenant Signature Date

Housing Authority Representative Signature Date

I/We **decline** to have the lock changed for our apartment, # _____ at Forrestal Heights Hamilton Fish Plaza. I/We releases the Housing Authority and all it's employees harmless from any and all damages resulting from this decision.

Tenant Signature Date

Tenant Signature Date

Housing Authority Representative Signature Date



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