

2024 Key Lock Replacement Form



Family Name: _____ Given Name: _____

Student Number: _____

Room Number: _____

Charges are all GST inclusive. Please tick applicable residence/charge:

Residence
<input type="checkbox"/> North
<input type="checkbox"/> East
<input type="checkbox"/> South
<input type="checkbox"/> West
<input type="checkbox"/> Edwards Hall - Main Hall
<input type="checkbox"/> Edwards Hall
<input type="checkbox"/> Evatt House
<input type="checkbox"/> Blue Gum House
<input type="checkbox"/> International House
<input type="checkbox"/> Barahineban

Key barrel reconciliation	
<input type="checkbox"/> Bedroom key	\$45.00
<input type="checkbox"/> Barrel change and access until fixed	\$92.00
<input type="checkbox"/> Bike shed key	\$22.00
	Total \$

I have read, understood and agree to the following conditions:

- Replacement cost as a result of key/lock change will be added to my Student Living Account
- I understand the charge will be applied to my account and will be deducted with the next direct debit.

Resident Signature: _____ Date: _____

Staff Signature: _____ Date: _____

FINANCE USE ONLY

Charge Raised	Date	Processed By

2024 Barrel and Key Reconciliation Form



Residence		Unit No.		Room No.	
Lost Room Key		Replacement Room Key			
Student name		Student initials			
Staff name		Staff initials			
Date StarRez updated					

Room number	New key serial number	Date old key returned	Date new key accepted	Student Name	Student Initials	Date StarRez updated

OFFICE USE ONLY

<input type="checkbox"/> Maintenance Request lodged Name: <input type="text"/> Date: <input type="text"/> Date new keys delivered: <input type="text"/>	<input type="checkbox"/> Initial SMS/email Name: <input type="text"/> Date: <input type="text"/>	<input type="checkbox"/> Follow up SMS/email: Name: <input type="text"/> Date: <input type="text"/> Date old keys returned: <input type="text"/>
<input type="checkbox"/> Barrel/key lock replacement form completed: Name: <input type="text"/>		Date: <input type="text"/>