



The Hong Kong University of Science and Technology

Campus Management Office

Request for Service to Locks of Door / Cabinet / Pedestal / Locker

Part I (To be completed by Applicant and endorsed by his/her Department Head)

Name : _____ Post/Rank : _____

E-mail Address : _____ Location/Room No. : _____

Dept./Office : _____ Fax No. : _____

Contact Tel. No. : _____ Applicant's Signature : _____

<p>1. <u>Request for *Opening/Replacement of Lock of:</u></p> <p><input type="checkbox"/> Door <input type="checkbox"/> Metal Cabinet <input type="checkbox"/> Pedestal <input type="checkbox"/> Locker</p> <p><input type="checkbox"/> Others _____</p> <p>2. <u>Reasons for Service</u></p> <p><input type="checkbox"/> Key Lost <input type="checkbox"/> Lock Malfunctioning</p> <p><input type="checkbox"/> Others _____</p> <p>3. Time/Date Reported to Security Office if Key Lost: _____</p> <p>Endorsed by Department Head: _____ Date: _____</p>

Please return the completed form to CMO
(Fax : 2335 0104 Enquiry hotline: 2358 6500)

Note: Response for service is subject to resources immediately available in CMO.

Part II (To be completed by CMO)

<p>Message received by CMO on : _____ Followed up by : _____</p> <p>Comments of Security Office (if any): _____ Time/Date: _____</p> <p>Service *Approved/Rejected by: _____ Time/Date: _____</p> <p>Distribution for Action: <input type="checkbox"/> Workshop By: _____ (Maximo W.O. No. _____) <input type="checkbox"/> Others: _____</p> <p>Materials Used: _____</p> <p><u>Working Time/Date:</u></p> <p><input type="checkbox"/> Office Hours _____ <input type="checkbox"/> Overtime: _____</p> <p>Remarks: _____</p>

Part III (To be completed by *Security Office/Applicant)

<p>*Keys Received/Service Acknowledged by: _____ Date: _____</p>
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Tick whichever appropriate
* Delete whichever appropriate