



LOCK & KEY REQUEST

Tenant Name: _____ Suite: _____

Person Making Request: _____ Phone # _____
(Print Name)

REQUEST	QUANTITY	AMOUNT	TOTAL
DUPLICATE KEYS	_____	\$ <u>5.00</u>	\$ _____
OFFICE LOCKSET	_____	\$ _____	\$ _____
STORAGE ROOM LOCKSET	_____	\$ _____	\$ _____
PASSAGE LOCK SET	_____	\$ _____	\$ _____
DEAD BOLT <i>Single Cylinder</i>	_____	\$ _____	\$ _____
<i>Double Cylinder</i>	_____	\$ _____	\$ _____
REKEY – 1 lock each additional cylinder)	_____	\$ _____	\$ _____
<i>*Locksmith travel service charge will be included in price</i>			
KEYLESS LOCKSET	_____	\$ _____	\$ _____
ENGINEER TIME (\$24 an hour-2 Hour Minimum)	_____	\$ _____	\$ _____
MANAGEMENT FEE - 15% of Invoice Total		\$ _____	\$ _____
OTHER:		\$ _____	\$ _____
TOTAL AMOUNT DUE			\$ _____

COMMENTS: _____

Tenant Authorization *(Print Name)*

Signature

Date

TPMC/Landlord's Representative

Date

Please Return this form to:

Management Office
5599 San Felipe, Suite 106, Houston, Texas 77056
E-mail: admin5599@tanglewoodproperty.com
Phone: (713) 621-1300 Fax: (713) 621-0218