

# KNOX MECHANICAL CORE REQUEST FORM

As a security measure, all requests for Mechanical Cores must be signed, dated, and submitted with an authorized signature. **This form is required to initiate the process.**

## COMPLETE THE FOLLOWING INFORMATION:

|  |        |      |
|--|--------|------|
| Department Name:   |        |      |
| Department System Code:  |        |      |
| Street Address (PO Boxes cannot be used. *See Important Note Below): |        |      |
| City:  | State: | Zip: |

\*Mechanical cores are shipped via FedEx and are sent to the fire department **(No Exceptions)**.

|                                  |               |
|----------------------------------|---------------|
| Name - Payment Point of Contact: |               |
| Email Address:                   | Phone Number: |

**LOCK TYPE:**

**PRODUCT:**

**SERIAL NUMBERS:**

**Quantity:** \_\_\_\_\_ **Provide the reason core(s) are needed:** \_\_\_\_\_

**Installation Address(es):** \_\_\_\_\_

|   |       |  |
|---|-------|--|
| Name of Authorized Signer:  |       |  |
| Title:  | Date: |  |
| Phone:  | Fax:  |  |
| Signer's Email Address:   |       |  |
| Authorized Department Signature (Only original signatures will be accepted - digital signatures will be rejected):<br>_____ |       |  |



**Upon completion, submit this form via email, mail, or fax:**

**Email:** [Orders@KnoxBox.com](mailto:Orders@KnoxBox.com) | **Address:** Knox Company, Attn: Customer Service 1601 W. Deer Valley Rd, Phoenix, AZ 85027 | **Fax:** 623-687-2296