

LOST COMBINATION OR SECURITY KEY NOTARIZED FORM

Sentry Fax: 585-381-2940

TO AVOID DELAYS IN PROCESSING YOUR REQUEST, PLEASE PRINT AND COMPLETE ALL REQUIRED INFORMATION BELOW

Requested item: Combo Keys Combo & Keys (Please choose one)
If keys: Override 4-bitted Other (Please choose one, if needed)

Reference # _____

I, _____, being duly sworn, state I am the rightful owner of a
(Print Name)
Sentry Group Safe **Model Number** _____ **Serial Number** _____

(Name)

(Address)

(City/State/Zip Code)

() -

(Telephone)

Payment Method: Personal or Business Check Credit Card Money Order
\$20.00 for each combination request, \$15.00 for each key (set of 2) ***Prices Subject to Change**
ALL KEYS WILL BE SENT TO ADDRESS ABOVE

Please respond with combination by the following method: (Please choose and fill in)

MAIL to address same as above

PICK UP – 882 Linden Ave – Rochester, NY

FAX NUMBER: _____

E-MAIL ADDRESS: _____

****NOTARY SECTION****

*****Notary must have a different last name than the customer*****

State of _____

County of _____

Sworn to and subscribed before me

This _____ day of _____, 20__

My commission expires on: _____, _____, 20__

Notary Public Seal or Stamp (Please provide on space to the right)

Date **Signature (Notary)** **Notary Name (PLEASE PRINT)**

Date **Signature (Safe Owner)** **Owner Name (PLEASE PRINT)**

SBB/10-15-04