



Authorization for Security and or Emergency Services

I hereby certify that I have the authority to order the lock, key, safe and security services indicated below. Further I agree to indemnify and hold harmless the locksmith who bears this authorization from any and all liability or claims that may arise from the performance of such services.

Name: _____

Address: _____

City/State/Zip _____

Phone: _____

Identification number: _____

Service Address: _____

City/State/Zip _____

Phone: _____

Service Performed: _____

Locksmith Company: Ashland Lock & Key LLC

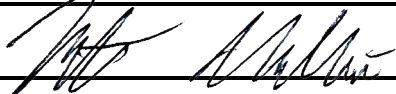
Address: 220 Main St E,

City/State/Zip Ashland WI 54806

Phone: 715-682-2934

Locksmith: Freddie Monkeliën

(Please Print)

Signature X  Date: _____

Customer Signature X _____ Date: _____