



SECURE REGISTRATION FORM

WYNNS LOCKSMITHS - ABN: 87 1423 175 98
 110 Bell Street Preston, VIC 3072
 Ph: 03 9495 1122
 Fax: 03 9495 1133
www.wynnslocksmiths.com.au

COMPLETE ALL THE BELOW DETAILS, INCOMPLETE FORMS WILL NOT BE PROCESSED

System number: _____ Site: _____

Property address: _____

Instructions:

Please complete this registration form and return by fax or email.
 Additional or replacement keys will be produced upon receipt of written instructions with authorised signature(s).
 Should a change of authorised signature(s) occur, please download and complete a new form.
 Please retain a copy of this form for your records.

Persons authorised to obtain additional keys

<input type="checkbox"/> Add signatory	Please record specimen signature within box using black pen
Name: _____ Title: _____ Mobile Ph: _____ Business Ph: _____ Email: _____	

<input type="checkbox"/> Add signatory	Please record specimen signature within box using black pen
Name: _____ Title: _____ Mobile Ph: _____ Business Ph: _____ Email: _____	

<input type="checkbox"/> Add signatory	Please record specimen signature within box using black pen
Name: _____ Title: _____ Mobile Ph: _____ Business Ph: _____ Email: _____	

<input type="checkbox"/> Add signatory	Please record specimen signature within box using black pen
Name: _____ Title: _____ Mobile Ph: _____ Business Ph: _____ Email: _____	

PLEASE RETURN VIA EMAIL: KEYS@WYNNSLOCKSMITHS.COM.AU