MURPHY
SECURITY SERVICE
230 OAK STREET, NEW BRITAIN, CT 06051
TEL: 860/229-7727 FAX: 860/223-0548

KEY AUTHORIZATION

I, _____, _____, of _____
LAST NAME FIRST NAME NO. STREET

hereby authorize the Murphy Security Service to issue the key to my residence to the following person(s) or representative(s) of the following organization(s), on the date(s) indicated:

PERSON(S) OR ORGANIZATION(S)	DATE(S)

It is understood and agreed that the key to my residence will not be issued to any other person(s) or representative(s) of any other organization(s) without my prior written authorization.

MSS-50

Signed_____ **Date**_____