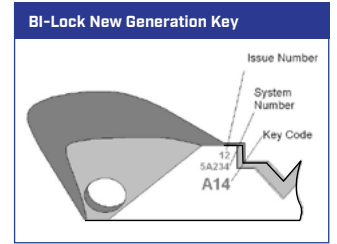
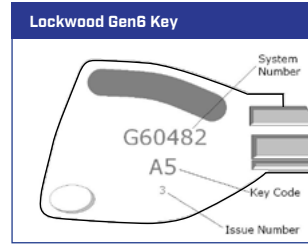


RESTRICTED KEY REQUEST FORM

All fields are mandatory and payment details must be provided.
 Return completed form to keys@omegacorp.com.au



Master Key System information	Date:	Key System Number: <i>(this is engraved on all keys)</i>		
	Company Name / Individual:	_____		
	Delivery Address:	_____		
	Suburb:	_____	Post Code:	_____
	Contact Phone Number:	_____		

Quantity Required	Key Code:	Qty:	Key Code:	Qty:
	_____	_____	_____	_____
	Key Code:	Qty:	Key Code:	Qty:
	_____	_____	_____	_____

Delivery Method	Registered Post \$16.50	Express Post \$25.00	Courier: POA
	Be notified when ready for collection		

Payment Details	EFT PAYMENT	CHEQUE
	Please provide us with an email address and a proforma invoice will be sent including banking details.	Please send a copy of this completed form with cheque.

	CREDIT CARD	COMPANY ACCOUNT
	Choose card type:	Invoice to: <i>(Company Account Name)</i>
	<input type="checkbox"/> Visa / Master Card <input type="checkbox"/> Amex Number: _____ Exp: _____ CCV: _____	Omega Account Code: _____ Purchase Order # _____
INVOICE TO BE SENT WITH GOODS	INVOICE TO BE SENT TO COMPANY ACCOUNT HOLDER	

Authorisation for keys to be cut	I hereby certify that I am registered as an authorised signatory for the above Master Key System, and I authorise Omega Security Solutions Pty Ltd to cut the above keys as required.	
	Authorised Signature: _____	Print Name: _____