

Delta Association of REALTORS®

Supra Key System

Lost or Damaged Key Report

Office Use Only Deposit amount on file: _____

Name: _____

Date: ____/____/2009

Office: _____

City: _____

Broker/Participant: _____

Phone: _____

Malfunction ~ Warranty Claim

Describe problem: _____

Reference #: _____

Key # Returned: _____

Key # Issued: _____

Cradle # Returned: _____

Cradle # Issued: _____

X _____
Receipt of Equipment Acknowledged by DAR

X _____
Receipt of New Equipment Acknowledged by KEYHOLDER

Lost Equipment

Describe circumstances of loss: _____

Lost Key Reports must be accompanied by a police report: _____
Case Number Agency

KEYHOLDER CERTIFIES THAT THE PIN CODE WAS NEITHER AFFIXED TO, NOR STORED WITH, THE SUPRA KEY:

X _____
Signature of Keyholder

Key # Lost: _____

Key # Issued: _____

Cradle # Lost: _____

Cradle # Issued: _____

X _____
Receipt of Police Report Number Acknowledged by DAR

X _____
Receipt of New Equipment Acknowledged by KEYHOLDER

Damaged Equipment

Describe type and manner of damage: _____

Key # Returned: _____

Key # Issued: _____

Cradle # Returned: _____

Cradle # Issued: _____

X _____
Receipt of Equipment Acknowledged by DAR

X _____
Receipt of New Equipment Acknowledged by KEYHOLDER