

ALOA's Positive ID Policy

ALOA locksmiths are instructed to use the following Positive Identification Policy when servicing lockouts or orders for keys by code:

- 1. **Notify Caller-** When a call comes in to request lockout services or code keys, ask the caller if he/she has identification and authority to open the lock. Advise them of the requirements of the Positive Identification Policy.
 - 2. Complete Form- Upon arrival at the job site or when the customer comes in, the locksmith should complete an Authorization for Security or Emergency Services Form that asks for the name, address, phone number, identification number and property description from the customer. If the keys are to be mailed, this can be done by fax or email.
 - 3. **Verify I.D-** Verify the customer's photo-identification card and compare it to the information provided by the customer. If no photo-ID card is available, ask for some other reasonable form of ID.
- 4. **Verify Authority-** The locksmith should inquire as to what authority the customer has to open the lock, and request to see any reasonable and appropriate evidence that could verify the authority.
 - 5. **Ask for Signature** Ask the customer to sign the Authorization Form, which should contain a statement that (a) the information given by the customer is correct, (b) the customer has the authority to open the lock, and (c) the customer shall indemnify and hold harmless the locksmith against liability.
 - 6. **Optional Last Resort-** If you have any suspicions that the customer is giving false information or does not have authority to open the lock, say that you will be happy to open the lock provided a law enforcement officer is present. If the customer agrees, call the police; if not, leave.
 - 7. **File the Form-** Keep the Authorization Form on file for a reasonable period of time. (Minimum of three years)



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:		
Address:		
City/State/Zip		
Phone:		
Locksmith:		
(Please Print) Signature X		
Customer Signature X	Date	