

Recovery Verification Form

In order to release any recovery information, we will need to confirm and document that you are a certified locksmith.

Please provide the following information and send the completed form to techsupport@securamsys.com

Date Requested: _____ **Time Requested:** _____

Name: _____

Company Name: _____

Address: _____

City/State/Zip: _____

Phone #: _____

Email: _____ **Website:** _____

Locksmith State Issue ID (Driver's License): _____

Circle one: ALOA / SAVTA

ALOA or SAVTA #: _____

6 Digit Verification Code (Choose a number that only you will know) _____

***You MUST submit a Photo Taken holding your Driver's License next to face for verification.**

Signature: _____ **Date:** _____

Print Name: _____

For SECURAM Administration Use Only:

Code Issued By: _____

Date/Time: _____

Specify In-House or In the Field: _____

Entrypad Type: _____

Entrypad Finish: _____

Serial # of Entry Pad: _____

Recovery Code of Safe Lock: _____

Encryption Code of Safe Lock: _____

Random Code as displayed on the LCD: _____

Decrypted Recovery Code: _____

Authorized Signature: _____ Date: _____