FLORIDA INTERNATIONAL UNIVERSITY

COPY CARD AGREEMENT FORM

DATE ____________

☐ New Card ☐ Replacement for Key # ________

☐ Account Number Change ☐ Grant Account

Current Card # __________ # of Keys ______ (Max: 3) Department Name ________________________________

Current Department Account # ______________________________ Change Current Account # To: _______________

Building ______ Room # ______ Campus ______ Effective Date of Grant ________________

Campus Phone: ___________________________ Expiration Date of Grant ________________

• Authorized Person For This Account ___________________________ Form Completed By ___________________________

TERMS OF AGREEMENT

The department requesting this copy control meter card agrees to use it according to the following rules and regulations.

• CONDITION FOR USAGE: I understand that this card is the property of Florida International University's copying operation, and cannot be transferred or given to another department without the approval of Duplicating Services. I will use this card in accordance with all state and copyright laws to reproduce university related material ONLY. I will return all cards upon request by the Duplicating Services.

• LOST OR STOLEN CARDS: I will contact the Duplicating Services immediately upon the loss of my copy card to prevent the reproduction of any unauthorized copies to this card. I will send written notification no later than forty eight (48) hours after the card has been lost or stolen. I understand that my account will be charged for all unauthorized copies made with this card up to the time the written notification is officially received. A fixed administrative charge of $50.00 will be assessed for any card that is lost. Additionally, a fee of $20.00 will be charged for the issuance of a new card (See card cost).

• GRANT ACCOUNTS: Upon expiration of this grant account, I will return all copy cards submitted by Duplicating Services.

• CARD COST: One copy card per account number will be issued at a cost of $20.00. Additional cards (maximum of two) for the same account number will cost $10.00 each. A $10.00 fee will be charged for replacement of damaged cards.

I fully understand the above regulations.

Authorized Signature for the Above Account ___________________________

Controller’s Office Approval ___________________________

Duplicating Services Approval ___________________________

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Key 1 Account Change
Key 2 Lost/Damaged Key
Key 3 Replaced Key
Available Keys Closed Account