

NMD Realty



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Resident Lock Change Request

Resident Name: _____

Address: _____

Unit: _____

City: _____

Date: _____

Time: _____

Best contact #: _____

I request permission to change the locks to my leased premises.

I understand that, if approved, all work must be performed by a licensed and insured locksmith.

I understand that if work is not performed properly, that the necessary repairs can be deducted from my security deposit.

I must submit 3 copies of all new keys to NMD Realty within 24 hours of job completion.

X _____

Resident

For Office Use Only

Date received: _____

Approved: _____

Denied: _____