**SOP 20**

**Keys**

##### Common areas

All keys and access cards under the control of Security must be held in a secured key cabinet situated in the Security Control room, each cabinet shall contain a list of all the keys held and shall detail: -

* The peg allocation
* The number of keys or cards per peg
* A description of the keys or cards on each peg

Each bunch of keys shall be labelled with the peg number only

All keys must be signed in and out by **all persons** – including Security.

All keys and access cards held shall be logged in the key register noting: -

* The serial number of each card or key reference number
* The location within the key cabinet where the keys or cards are stored

Keys for restricted areas must only be issued to **authorised** personnel, if in doubt to the authorisation; clarification should be sought from the client.

**Please note: master keys to blocks must never be issued unless permission has been given by the FM Manager,**

**Procedure:**

Ensure that any person requesting a key supplies you with the appropriate area they wish to gain access to. This area shall then be cross – referenced with the key list in the cabinet. On issue, only the peg number is entered into the key log ensuring that the drawer prints and signs their name.

On return of keys, the details shall be checked against the key register and the security officer shall sign and note the time of return.

All missing keys shall be reported immediately to FM Manager

Keys must be returned to the key cabinet immediately when handed back in. At shift Handover the state of the site keys must be captured i.e what is still out and why. Any discrepancies must be raise with site management, if the keys cannot be traced.

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**Supervisory staff/management should check and confirm every 3 months that all stored keys match the key register. This check must be logged in the key register.**

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| SPECIFIC INSTRUCTIONS RELATING SOP21 |
| On the dates below I certify that I have received and fully understand the training in the correct use of the instructions specific to contract as specified by this procedure.  |

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| OFFICERS NAME | PIN NUMBER | DATE TRAINING COMPLETE | OFFICER SIGNATURE | MANAGER SUPERVISOR NAME  | MANAGER SUPERVISOR SIGNATURE |
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