West Virginia State Treasurer's Office
SUB VAULT ACCESS AUTHORIZATION FORM

Vault Number: _____ Date: _____

Agency Name: _____ ("Agency")

The undersigned, on behalf of the above-named Agency, hereby authorizes the West Virginia State Treasurer's Office ("STO") to grant to the persons named below ("Authorized Personnel") access to the Agency's sub vault with the STO:

Name (printed):_____
Signature: _____

Name (printed):_____
Signature: _____

Name (printed):_____
Signature: _____

Name (printed):_____
Signature: _____

Access will be provided in conformance with the vault access procedures established by the STO. All Authorized Personnel will provide a copy of their Agency Photo ID or driver's license to STO Safekeeping staff prior to obtaining sub vault access or copying any items therein. The STO is authorized to keep and maintain said copies in the Safekeeping files. The Agency will immediately notify the STO in writing of any change in the Authorized Personnel.

I hereby acknowledge that a sub vault combination has been received from the STO for all Authorized Personnel. I agree that if the combination is lost by any Authorized Personnel of this Agency and the sub vault must be drilled for access, the Agency will be assessed drilling fees as charged by the drilling company.

Signature: _____ Title: _____
Printed Name: _____

STO USE ONLY:

The West Virginia State Treasurer's Office Safekeeping staff has received copies of Agency Photo IDs or driver's licenses for all Authorized Personnel designated by the Agency hereinabove and will keep and maintain said copies in the State Treasurer's Office Safekeeping files.

Sub vault combinations were given to Authorized Personnel on _____.

STO Safekeeping Signature: _____

Date_____