



**KEY RELEASE 2**

**Release Location 2:** (only if client did not receive keys at Key Release 1)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

**Provided by:**

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Check one:  Client  Shelter/DHS Staff  Housing Opportunity Team

If Shelter/DHS Staff:

\_\_\_\_\_  
Shelter Name

\_\_\_\_\_  
Title

**Provided to client:**

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**(Turn Page)**

