



# University Compliance, Ethics, and Risk Office

UNIVERSITY OF CENTRAL FLORIDA

## University of Central Florida Draft Policy Submission Cover Memo Form

Policy No. and Title:

Initiating Authority:

Initiating Authority Approval Date:

Date of Submission for Review:

Submitted by:

Department:

New Policy

Existing Policy (5-year Review)

Existing Policy (Out of Cycle  
Review)

**Summary of Revisions:** (For a new policy, please provide a summary of the policy. For an existing policy, please provide a summary of the revisions made to the policy.)

**Stakeholders included in the Review Process:** (Provide a list of departments involved in the review/revision process.)

Stakeholder feedback must also be requested from the [Faculty Senate](#) and the [College Policy Liaisons](#). By checking the boxes below, you are confirming that feedback from these groups was requested, received, and considered in the draft policy.

College Policy Liaisons

Faculty Senate

**Regulatory Requirements** (if applicable): (Provide information on regulatory requirements pertaining to the policy, including specific statute or regulation number.)

**Presenters:** (Provide the name(s), position title(s), and email address(s) for all individuals who will be presenting the policy to the university's Policies and Procedures Committee.)



# Draft - Safe, Keys, Combinations, and Access

**Policy Number** 3-108.1  
**Responsible Authority** Director of Facilities Operations Senior Associate Vice President of Utilities and Engineering Services and Chief Engineer and Chief of Police and Associate Vice President of Public Safety  
**Initiating Authority** Vice President, for Administration Administrative Operations and Finance and Chief Financial Infrastructure  
Officer  
Interim Vice President for Administration and Finance and Chief Financial Officer  
**Effective Date** 7/25/2015  
**Date of Origin** 8/31/2009

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## APPLICABILITY/ACCOUNTABILITY

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This policy is applicable to all University of Central Florida departments, units, and divisions and includes all safes or file cabinets secured by a combination lock, except a) safes or cabinets controlled by a non-university agency, for which that agency does not permit centralized storage of combinations; eb) safes or cabinets specifically exempted, in writing, by the Vice pP resident for Administration and Finance Administrative Operations and Chief Infrastructure Officer-, and Associate Vice President of Public Safety, and/or Vice President of People and Workplace Experience.

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## POLICY STATEMENT

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It is the policy of the university to ensure access to university assets. The Facilities Operations locksmith University Lock sShop will maintain a centralized backup record of combinations for all designated safes equipped with combination locks. Departments are responsible for obtaining and using safes that are properly designed for the contents they store. Biometric safes are not permitted because they do not provide reliable centralized override access or combination recovery mechanisms. Each department or individual responsible for a safe or file cabinet controlled by a combination type or key lock and key safe must furnish the Facilities Operations locksmith University Lock Shop with a copy of the combination and /or key, as well as any associated special opening instructions.

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## DEFINITIONS

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**Class C Safe.** A receptacle designed to protect its contents from fire; it protects paper documents for up to one hour at temperatures up to 1700° Fahrenheit.

**Combination.** A sequence of letters or numbers chosen in setting a lock.

**Safe.** A locked place or receptacle intended to keep valuables secure.

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## PROCEDURES

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A. Departments must notify the University Lock Shop upon acquisition or installation of a safe requiring combination backup.

A.B. \_\_\_\_\_ Combinations and keys, along with any special opening instructions, shall be ~~printed~~included on letter size paper and sealed within a pre-printed 10" x 11" envelope available from the office of the University Lock Shop Facilities Operations locksmith. Only one combination and/or key shall be included in each envelope.

B.C. \_\_\_\_\_ Information shall be entered on the pre-printed envelopes, and the responsible individual will sign in ink along or across the flap opening. ~~§~~The signature shall be covered with non-removable transparent (Scotch or equivalent) tape.

C.D. \_\_\_\_\_ By appointment with a designated member of the locksmith team,  
~~c~~Combination and key envelopes shall be hand carried to the ~~office of the Facilities Operations locksmith.~~University Lock Shop.

D. \_\_\_\_\_ The ~~Facilities Operations locksmith~~ University Lock Shop shall store all received combinations and keys in a Class C security container located within the locksmith's enclosure. This container shall be kept locked and not be used to store any other material ~~without specific approval of the associate vice president for Administration and Finance.~~

E. Combinations and keys may only be removed from the ~~Facilities Operations~~University Lock Shop security container for the following reasons:

1. Upon request by the person(s) authorized to open the envelope
2. Upon authorization of a vice president or the president
3. In an emergency, when it is not practicable to contact any of the above, by the ranking campus police official present on campus.

F. \_\_\_\_\_ Once a safe combination envelope has been opened for any reason, or an individual with knowledge of the combination no longer requires access to the safe (including, but not limited to employment transfer or separation), the combination shall be changed and a new envelope containing the new combination submitted to the University Lock Shop.

F.G. [Departments should review safe access annually and update combinations as necessary.](#)

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## **CONTACTS**

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[University Lock Shop](#): 407-823-5223