

Figure: 7 TAC §3.35(e)

REPORT OF DEFACED OR ALTERED ROUTING NUMBER ON SAFE DEPOSIT BOX KEY

Instructions: Complete the information below and submit the original report to Department of Public Safety, Attn: Criminal Law Enforcement, Box 4087, Austin, Texas 78773-0001, no later than 10 days after the defaced or altered key is used to access the box. Retain one copy for your files for a period of three years.

FINANCIAL INSTITUTION INFORMATION

Name of financial institution _____
Address of safe deposit box facility _____

Name and title of contact person at facility _____
Area code and phone number of facility _____
Routing number and branch designation (if any) _____

INCIDENT INFORMATION

Customer name _____
Date customer presented defaced or altered key _____
Description of problem with key _____

Date of report: _____

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