

Card Access Request Form

For the Sussex County Law Library

Please fill out form completely and return to Sussex County Law Librarian.

Attorney Name: _____ **Date of Birth:** _____

Delaware Driver's Lic Number: _____

Please note that if the employee does not have a Delaware Drivers License they will be required to make an appointment with the Superior Court Chief of Security for a photograph to be taken.

Attorney Firm / Department: _____

Address: _____

Law Library Access: Days of Week: _____ **Hours:** _____

Attorney Signature: _____

Law Librarian Signature: _____

SUPERIOR COURT CHIEF OF SECURITY

Received by: _____ **Date:** _____

Card Access #: _____ **New Card** or **Replacement**

Reason for Replacement: _____

The above listed access card was returned.

Attorney Signature/Date: _____

Law Librarian Signature/Date: _____