# **Work Order Form**

HCCS – MAINTENANCE DEPARTMENT

##### **West Loop Center**

#### FAX NO. 713-718-7932

## Requester Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Urgent: Yes\_\_\_\_\_ No\_\_\_\_\_

###### Room: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description of Work Order Requested:

**-----------------------Maintenance Use Only---------------------------**

Description of completed Work Order and Material Used:

### Completed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Time Started: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time Ended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The HCCS-Maintenance Department receives and process request work orders daily. Our overall goals are to schedule and complete these services in a timely manner. In order to perfect our goals, each Campus must complete a work order form and return to the Maintenance office. Thank you in advance for your cooperation.