

Date _____

The University of Michigan Plant Operations Work Order

WORK ORDER #

DO NOT write in boxed areas.

****Please Type Only****

Handwritten copies make it difficult for us to obtain adequate information and may cause delays in getting your job done.

Property

Short Code **OR** Fund Dept. Id (Org.) Class Program Project/Grant

Authorized Printed Authorized Signature Phone #

On-Site Contact Name Phone # E-Mail Address
(Person the maintenance crew will look for on site if questions.) (to be notified upon completion of the job)

Person to be contacted w/ W.O. # Phone # E-Mail Address Fax #
(If different than On-Site contact) Please indicate the preferred method of receiving the WO #by completing that section above.

Building Name Ref. Number

Description of work to be done, please include location of work to be done:
(If you are typing this on-line, please be sure to move your mouse and click in another field before printing.)

Title _____					
_____	_____	_____	_____	_____	_____
Type	Category	Problem Code	Priority	Date Received	
_____			_____		
Est. Cost			Est. given by		
_____	_____	_____	_____	_____	_____
Shop #	Shop #	Shop #	Shop #	Shop #	Shop #
Confirmed to _____ By _____ on _____ at __ : ____					

Please fax your request to 763-2932 or mail to 326 E. Hoover Box 1002. Once the request is processed the contact person noted above will be notified with the Work Order number assigned to this request. For questions please contact the Plant Operations Call Center at 647-2059. New forms can also be found on the web at http://www.plant.bf.umich.edu/workcontrol/PDF/Work_Order.pdf