WORK ORDER REQUEST FORM HCCS – MAINTENANCE DEPARTMENT West Loop Center FAX NO. 713-718-7932

Requester Name:	Date: Telephone:		
Department:			
Location:	Urgent:	Yes	No
Room:			
Description of Work Order Requested:			
Maintenance Use Or	nly		
Description of completed Work Order and Material Used:			
Completed By:	Date:		
Time Started:	Time Ende	d:	

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.