WORK ORDER FORM

BUILDINGS & GROUNDS DEPT. - YORK COLLEGE

Please fill in spaces below - leave no blanks. Type in all information. Please do not write in spaces below.

DEPT. __________ DEPT. TEL NO. ______

BIDG. ______ ROOM NO. ______

State work, services or repairs to be done:

____________________________ ______________________

Date:

Work done by: ----------------- 

DATE: TIME: HRS.: ---

Material used: 

Description of work: 

CHECK ONE:

O Completed

D Not completed

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