

# Work Order

Date of request: \_\_\_\_\_

Site: \_\_\_\_\_

Name of person making request: \_\_\_\_\_

Nature of the work requested:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is this repair necessary due to damage by an individual?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

If yes, has payment been discussed with the Program Specialist?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date received by CEO: \_\_\_\_\_

Person who will complete work: \_\_\_\_\_

Estimates Received: \_\_\_\_\_ Amount: \_\_\_\_\_

Scheduled date for start of work: \_\_\_\_\_

Date completed: \_\_\_\_\_

\_\_\_\_\_  
Signature of person completing work