



**Building Maintenance  
Request for Service**

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

- First Request
- Second Request

Please furnish a detailed description of the service(s) you are requesting:

Services requested by: Name:  
 Dept:  
 Phone:

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**DEPARTMENT OF ENGINEERING ONLY**

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- Emergency** (*Work required to eliminate an emergency condition within 24 hours of notification that is detrimental to health, safety or operations*)
- Urgent** (*Work that is not an emergency, but must be responded to and completed, or materials ordered, with 7 calendar days of receipt. If materials are ordered, completion shall be within 7 calendar days after receipt of materials.*)
- Routine** (*Work that does not qualify as emergency or urgent work, but should be accomplished as soon as possible. i.e. no later than 30 calendar days after identifying requirement or receipt of materials.*)

Approved: \_\_\_\_\_ Date: \_\_\_\_\_

**Action Taken / Comments:**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_