

SONOMA COUNTY JUNIOR COLLEGE DISTRICT

SERVICE REQUEST

(Please complete and submit to Facilities Operations Fax: 524-1668 or Inter-Office mail)

Today's Date _____

Job # _____

EHS# _____

Building: _____

Room/Area: _____

If Event Setup is needed, please indicate event day and date: _____

Set-up time: _____ Event Time: _____ Take Down time: _____

____ Setup sketch attached ____ Setup sketch to follow ____ Setup sketch faxed (524-1668)

SERVICE REQUESTED

(When requesting a number of jobs that involve different trades -- electrical, carpentry, plumbing, grounds, etc. -- A SEPARATE FORM IS REQUIRED FOR EACH TRADE)

Requested by: _____ Ext: _____ Dept.(Mailbox) _____

(PLEASE PRINT OR TYPE NAME)

DO NOT TYPE/WRITE BELOW THIS LINE - FACILITIES OPERATIONS USE ONLY

Approved By: _____ Assigned To: _____

Completed By: _____ Date complete: ____/____/____ Labor Hrs: _____

Vendor: _____ P.O. # _____

CLASS OF WORK:

Material Used:

Cost:

- Move/Remove
- Landscaping/Gardening
- Safety
- Repair/Replace
- Prev Maint
- Vandal/Graffiti
- Other: _____

- Improve
- ADA
- Special Events
- Contract
- Instructional

SCHEDULE START _____

DATE DUE: _____