**
FACILITY WORK ORDER**

Date of Request: Click here to enter a date. Requested by: Click here to enter text.

 Phone #: Click here to enter text.

Type of Repair Needed (Please check area(s) in need of attention):

|  |  |  |
| --- | --- | --- |
| [ ]  Appliance | [ ]  Fire/Safety | [ ]  Lock/Door Repair |
| [ ]  Custodial | [ ]  Glass Repair | [ ]  Plumbing |
| [ ]  Electrical / Lighting | [ ]  Heat or A/C | [ ]  Preventive Maintenance |
| [ ]  Other Click here to enter text. |

Problem/Defect: Click here to enter text.

Exact location: Click here to enter text.

**PLEASE EMAIL THIS WORK ORDER TO MAINTENANCEREQUESTS@BWCAR.ORG.**

 **Work Order Completed By:** Click here to enter text. **Date:** Click here to enter a date.

**Revised 1.24.2017/jCohen/P:FORMS/FacilityWorkOrder-Fillable**