



REPAIR AND MAINTENANCE REQUEST

Filled in by requesting party		Filled in by PPO	
Date filed	: DEC. 4, 2014	Date received	:
Building/Facility/ House No/ Apartment No./ Department	: DMS	Received by	: Name & Signature
Location	: DMS Preparatory Room	Designation/ Position	:
Requesting party	: ROSALINA D. POLIQUIT	Maintenance control number	:
Designation/ Position	: Chairman DMS Building Committee		

Note:

- Three (3) copies: (1) for requesting party, (1) for PPO unit Head & (1) for maintenance team
- One (1) job request in every of PPO unit
- Job request control number is required.

Please check and specify the nature of work requested

- | | | |
|--|--|---|
| <input type="checkbox"/> Vehicle Repair | <input checked="" type="checkbox"/> Carpentry & Furniture Works | <input type="checkbox"/> Electrical Works |
| <input type="checkbox"/> Welding Works | <input type="checkbox"/> Plumbing Works | <input type="checkbox"/> Heating, Ventilating, Air conditioning & Refrigeration |
| <input type="checkbox"/> Machining works
(lathe, shaper, drill press, etc.) | <input type="checkbox"/> Instrumentation
equipment
& Laboratory instrument | <input type="checkbox"/> Others (specify): |

Brief Description of Repair and Maintenance

Concreting of cabinet shelves @ prep. room

Materials/Supplies/Parts:

☐ Available

☐ Not Available

Filled in by PPO personnel

Part/Supplies/Materials Required	Manpower Requirement	Estimated hours/days to finished

Inspected
by:

PPO Maintenance

Checked
& Verified
by:

PPO Unit Head

Approved
by:

PPO Director



REPAIR AND MAINTENANCE REQUEST

Filled in by requesting party		Filled in by PPO	
Date filed	: Dec. 4, 2021	Date received	:
Building/Facility/ House No/ Apartment No./ Department	: DMS	Received by	:
Location	: DMS 104	Designation/ Position	: Name & Signature
Requesting party	: ROSALINA D. POLIQUET	Maintenance control number	:
Designation/ Position	: Chairman DMS Building Committee		

Note:

- Three (3) copies: (1) for requesting party, (1) for PPO unit Head & (1) for maintenance team
- One (1) job request in every of PPO unit
- Job request control number is required.

Please check and specify the nature of work requested

- | | | |
|--|--|---|
| <input type="checkbox"/> Vehicle Repair | <input checked="" type="checkbox"/> Carpentry & Furniture Works | <input type="checkbox"/> Electrical Works |
| <input type="checkbox"/> Welding Works | <input type="checkbox"/> Plumbing Works | <input type="checkbox"/> Heating, Ventilating, Air conditioning & Refrigeration |
| <input type="checkbox"/> Machining works
(lathe, shaper, drill press, etc.) | <input type="checkbox"/> Instrumentation
equipment
& Laboratory instrument | <input type="checkbox"/> Others (specify): |

Brief Description of Repair and Maintenance

Replacement of ^{termites damage} doors & DMS 104

Materials/Supplies/Parts:

☐ Available

☐ Not Available

Filled in by PPO personnel

Part/Supplies/Materials Required	Manpower Requirement	Estimated hours/days to finished

Inspected
by:

PPO Maintenance

Checked
& Verified
by:

PPO Unit Head

Approved
by:

PPO Director



REPAIR AND MAINTENANCE REQUEST

Filled in by requesting party	
Date filed	: Dec. 01, 2021
Building/Facility/ House No/ Apartment No./ Department	: DBS
Location	: DBS 101
Requesting party	: ROSALINA D. POLIQUIT
Designation/ Position	: DBS Building Committee- Chair

Filled in by PPO	
Date received	:
Received by	: Name & Signature
Designation/ Position	:
Maintenance control number	:

Note:

- Three (3) copies: (1) for requesting party, (1) for PPO unit Head & (1) for maintenance team
- One (1) job request in every of PPO unit
- Job request control number is required.

Please check and specify the nature of work requested

- | | | |
|--|--|---|
| <input type="checkbox"/> Vehicle Repair | <input type="checkbox"/> Carpentry & Furniture Works | <input checked="" type="checkbox"/> Electrical Works |
| <input type="checkbox"/> Welding Works | <input type="checkbox"/> Plumbing Works | <input type="checkbox"/> Heating, Ventilating, Air conditioning & Refrigeration |
| <input type="checkbox"/> Machining works
(lathe, shaper, drill press, etc.) | <input type="checkbox"/> Instrumentation
equipment
& Laboratory instrument | <input type="checkbox"/> Others (specify): |

Brief Description of Repair and Maintenance

Replacement of electrical C fluorescent tubes to LED lamps @ -
DBS 101

Materials/Supplies/Parts:

☐ Available

☐ Not Available

Filled in by PPO personnel

Part/Supplies/Materials Required	Manpower Requirement	Estimated hours/days to finished

Inspected
by:

PPO Maintenance

Checked
& Verified
by:

PPO Unit Head

Approved
by:

PPO Director