



PHYSICAL PLANT SERVICE REQUEST FORM

Filled in by requesting party		Filled in by PPO	
Date filed	: January 19, 2022	Date received	:
Building/Facility/ House No/ Apartment No./ Department	: D L A B S	Received by	:
Location	: ERR-2	Designation/ Position	: Name & Signature
Requesting party	: ERROL C. FERNANDEZ	Maintenance control number	:
Designation/ Position	: Chair, Physical Facilities Committee		

To be accomplished in three (3) copies

Please check and specify the nature of service request	
<input type="checkbox"/> Audio System (amplifier, speakers and microphones) With Lights? Yes. ___ No. ___ Setup Location: _____ Date & Time Needed: _____ Estimated Duration (hrs): _____	<input type="checkbox"/> Tent installation/s Setup Location: _____ No. of tent: _____ Tent size: _____
<input type="checkbox"/> Land preparation, plowing & harrowing Location/Area covered: _____ Estimated passing trip: _____	<input type="checkbox"/> Fabrication/s (new cabinets, furniture, metal works and other fabrications not considered as repair and maintenance)
<input type="checkbox"/> Site development, levelling, scrapping & backfilling Location: _____	<input type="checkbox"/> Installation/s (tarpaulin, signage, new lock & knobs & other installation not considered as repair and maintenance)
<input type="checkbox"/> Hauling (Construction materials, office equipment & etc.) From: _____ To: _____	<input type="checkbox"/> Machining works (lathe, shaper, drill press & etc.) <input type="checkbox"/> Others (specify): Pipe replacement

Brief Description of Service Request
Service faucet outside DLABS ERR-2 has a leak. Pipe needs to be replaced.

Service Conducted by : _____
 Name & Signature

PPO Unit : _____

Conformed by
(Requesting Party) : _____
 Name & Signature

Checked by
(PPO Unit Head) : _____
 Name & Signature

To be filled by the requesting party after service request conducted	
Overall Service Satisfaction	
1. Not Satisfied	_____
2. Slightly Satisfied	_____
3. Moderately Satisfied	_____
4. Very Satisfied	_____
5. Extremely Satisfied	_____