



**REPAIR AND MAINTENANCE REQUEST**

REQUEST INFORMATION	
<i>Filled in by requesting party</i>	
Date filed	August 28, 2025
Building/Department	Eco-FARMI
Location	Eco-FARMI Building
Requesting party	<b>ED ALLAN L. ALCOBER</b>
Designation/Position	Name & Signature
Contact no./Email	Head, Eco-FARMI

<i>Filled in by GenSO</i>	
Date received	
Received by	Name & Signature
Designation/Position	
Request Reference Number	

*Please check and specify the nature of work requested:*

<input type="checkbox"/> Vehicle Repair	<input type="checkbox"/> Carpentry & Furniture Works	<input type="checkbox"/> Electrical Works
<input type="checkbox"/> Welding Works	<input type="checkbox"/> Plumbing Works	<input checked="" 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 in the brief description below)

**Brief Description of the Nature of Work Requested**

Repair of one (1) air conditioning unit located at the Eco-FARMI, 1st Floor.

**INSPECTION** (Filled in by GenSO Personnel)

Date of Inspection: \_\_\_\_\_ Time started: \_\_\_\_\_ [AM] [PM] Time ended: \_\_\_\_\_ [AM] [PM]

☐ In-House Repair and Maintenance ☐ For Outsourcing Repair and Maintenance

Materials/Parts	Manpower Required: _____	Estimated hours/days of repair: _____
<input type="checkbox"/> Available	<input type="checkbox"/> Available	<b>Schedule of repair:</b> _____
<input type="checkbox"/> Not Available	<input type="checkbox"/> Not Available	

Conducted: \_\_\_\_\_ Confirmed: \_\_\_\_\_

GenSO Maintenance Personnel/Name & Sign \_\_\_\_\_ Name and Signature \_\_\_\_\_

Designation/Position \_\_\_\_\_ Designation/Position \_\_\_\_\_

**ACCOMPLISHMENT**

Filled in by GenSO Personnel		Filled in by Requesting Party	
Conducted by	GenSO Maintenance Personnel (Name and Signature)	<b>Service Satisfaction</b>	<b>OVER ALL RATING</b>
Date & Time Started		<input type="checkbox"/> 1. Not Satisfied	<input type="checkbox"/> 1. Poor <input type="checkbox"/> 2. Fair
Date & Time Finished		<input type="checkbox"/> 2. Slightly Satisfied	<input type="checkbox"/> 3. Good <input type="checkbox"/> 4. Very Good
Checked & verified	GenSO Head/Director (Name and Signature)	<input type="checkbox"/> 3. Moderately Satisfied	<input type="checkbox"/> 5. Excellent
Notes:		<input type="checkbox"/> 4. Very Satisfied	<b>Comments &amp; Suggestion</b>
		<input type="checkbox"/> 5. Extremely Satisfied	
		Name & Signature	
		Designation/Position	