



REPAIR AND MAINTENANCE REQUEST

REQUEST INFORMATION																							
<i>Filled in by requesting party</i> Date filed : October 26, 2023 Building/Department : Advanced Research and Innovation Center Location : ARICenter Bldg. Requesting party : MA. THERESA P. LORETO <div style="text-align: right;">Name & Signature</div> Designation/Position : Director, ARI Center Contact no./Email : mtploreto@vsu.edu.ph		<i>Filled in by PPO</i> Date received : _____ Received by : _____ <div style="text-align: right;">Name & Signature</div> 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 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 in the brief description below)																					
Brief Description of the Nature of Work Requested																							
To check and repair sound system speaker.																							
INSPECTION (Filled in by PPO Personnel)																							
Date of Inspection: _____ Time started: _____ [AM] [PM] Time ended: _____ [AM] [PM]																							
<input type="checkbox"/> In-House Repair and Maintenance		<input type="checkbox"/> For Outsourcing Repair and Maintenance																					
Materials/Parts	Manpower Required: _____	Estimated hours/days of repair: _____																					
<input type="checkbox"/> Available	<input type="checkbox"/> Available	Schedule of repair: _____																					
<input type="checkbox"/> Not Available	<input type="checkbox"/> Not Available																						
Conducted: _____		Confirmed: _____																					
PPO Maintenance Personnel/Name & Sign		Name and Signature																					
Designation/Position		Designation/Position																					
ACCOMPLISHMENT																							
<i>Filled in by PPO Personnel</i> Conducted by : _____ <div style="text-align: right;">PPO Maintenance Personnel (Name and Signature)</div> Date & Time Started : _____ Date & Time Finished : _____ Checked & verified : _____ <div style="text-align: right;">PPO Head/Director (Name and Signature)</div> Notes: _____		<i>Filled in by Requesting Party</i> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #FFD700;"> <th style="width: 50%;">Service Satisfaction</th> <th style="width: 50%;">OVER ALL RATING</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> 1. Not Satisfied</td> <td><input type="checkbox"/> 1. Poor <input type="checkbox"/> 2. Fair</td> </tr> <tr> <td><input type="checkbox"/> 2. Slightly Satisfied</td> <td><input type="checkbox"/> 3. Good <input type="checkbox"/> 4. Very Good</td> </tr> <tr> <td><input type="checkbox"/> 3. Moderately Satisfied</td> <td><input type="checkbox"/> 5. Excellent</td> </tr> <tr> <td><input type="checkbox"/> 4. Very Satisfied</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 5. Extremely Satisfied</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center;">Comments & Suggestion</td> </tr> <tr> <td colspan="2" style="height: 40px;"></td> </tr> <tr> <td colspan="2">Name & Signature</td> </tr> <tr> <td colspan="2">Designation/Position</td> </tr> </tbody> </table>		Service Satisfaction	OVER ALL RATING	<input type="checkbox"/> 1. Not Satisfied	<input type="checkbox"/> 1. Poor <input type="checkbox"/> 2. Fair	<input type="checkbox"/> 2. Slightly Satisfied	<input type="checkbox"/> 3. Good <input type="checkbox"/> 4. Very Good	<input type="checkbox"/> 3. Moderately Satisfied	<input type="checkbox"/> 5. Excellent	<input type="checkbox"/> 4. Very Satisfied		<input type="checkbox"/> 5. Extremely Satisfied		Comments & Suggestion				Name & Signature		Designation/Position	
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