



REPAIR AND MAINTENANCE REQUEST

REQUEST INFORMATION	
<i>Filled in by requesting party</i>	
Date filed	April 3, 2024
Building/Department	Dept. of Economics
Location	Upper Campus
Requesting party	ZYRA MAY H. CENTINO
	Name & Signature
Designation/Position	Faculty
Contact no./Email	1024 (VOIP)

<i>Filled in by PPO</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 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
1. Installation of new units of door knob in the class rooms.

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>	<i>Filled in by Requesting Party</i>																	
Conducted by: _____ PPO Maintenance Personnel (Name and Signature)	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #FFFFE0;"> <th>Service Satisfaction</th> <th>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 rowspan="2">Comments & Suggestion</td> </tr> <tr> <td><input type="checkbox"/> 5. Extremely Satisfied</td> </tr> <tr> <td>Date & Time Started: _____</td> <td rowspan="3"> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 40px;"></div> </td> </tr> <tr> <td>Date & Time Finished: _____</td> </tr> <tr> <td>Checked & verified: _____ PPO Head/Director (Name and Signature)</td> </tr> <tr> <td>Notes:</td> <td></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	Comments & Suggestion	<input type="checkbox"/> 5. Extremely Satisfied	Date & Time Started: _____	<div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 40px;"></div>	Date & Time Finished: _____	Checked & verified: _____ PPO Head/Director (Name and Signature)	Notes:	
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