



REPAIR AND MAINTENANCE REQUEST

REQUEST INFORMATION	
<i>Filled in by requesting party</i>	
Date filed	: September 9, 2025
Building/Department	: ISRDS
Location	: VSU, Visca Baybay City
Requesting party	: LILIAN B. NUNEZ Name & Signature
Designation/Position	: Director
Contact no./Email	:

<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

Check and repair aircon unit at the ISRDS AV Room.

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	Schedule of repair: _____
<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	
<i>Filled in by GenSO Personnel</i>	
Conducted by	: GenSO Maintenance Personnel (Name and Signature)
Date & Time Started	:
Date & Time Finished	:
Checked & verified	: GenSO Head/Director (Name and Signature)
Notes:	

<i>Filled in by Requesting Party</i>	
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"/> 4. Very Satisfied	<input type="checkbox"/> 5. Excellent
<input type="checkbox"/> 5. Extremely Satisfied	
Comments & Suggestion	
Name & Signature	
Designation/Position	