



## REPAIR AND MAINTENANCE REQUEST

Filled in by requesting party	
Date filed	: August 19, 2022
Building/Facility/ House No/ Apartment No./ Department	: Eco-FARMI
Location	: VSU, Visca, Baybay Leyte
Requesting party	: <u>DHENBER C. LUSANTA</u> Name & Signature
Designation/ Position	:

Filled in by PPO	
Date received	:
Received by	: _____ Name & Signature
Designation/ Position	:
Maintenance control 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): _____
Materials/Supplies/Parts:		<input type="checkbox"/> Available <input type="checkbox"/> Not Available

Brief Description of Repair and Maintenance
Check and repair electric lines at the Director's Office and Training Hall. Repair electric outlet at the admin office.

Filled in by PPO personnel		
Part/Supplies/Materials Required	Manpower Requirement	Estimated hours/days to finished

Filled in by the requesting party after the conduct of repair and maintenance														
Conducted by: _____ PPO Personnel (Name & Signature)	<table border="1"> <thead> <tr> <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 &amp; Suggestion</td> </tr> <tr> <td><input type="checkbox"/> 5. Extremely Satisfied</td> </tr> <tr> <td>Name and Signature</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	Name and Signature	
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Checked & Verified by: _____ PPO Head (Name & Signature)														