

REPAIR AND MAINTENANCE REQUEST

Filled in by requesting party	
Date filed	: September 21, 2022
Building/Facility/ House No/ Apartment No./ Department	: DA PSB ROOM 01 & 02 Department of Agronomy
Location	: VSU, Upper Campus
Requesting party	: Ruth O. Escasinas
Designation/ Position	: Name & Signature Department Head

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 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:

☐ Available☐ Not Available

Brief Description of Repair and Maintenance	
1.	Check and repair of electrical lights and ceiling fan.

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

Conducted by: _____ PPO Unit _____ Checked & Verified by: _____		PPO Personnel <i>(Name & Signature)</i>		PPO Head <i>(Name & Signature)</i>	
		Filled in by the requesting party after the conduct of repair and maintenance			
		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			