



REPAIR AND MAINTENANCE REQUEST

REQUEST INFORMATION

Filled in by requesting party

Date filed : September 4, 2024

Building/Department : PHYSICS

Location : Upper Campus

Requesting party : REV RHIZZA L. AURE

Name & Signature

Designation/Position : Department Head

Contact no./Email : revrhizza.aure@vsu.edu.ph

Filled in by PPO

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 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

Request to install lighting of DPhys Lecture Room 1.

INSPECTION (Filled in by PPO 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: _____

Schedule of repair: _____

☐ Available

☐

Available

☐ Not Available

☐

Not Available

Conducted:

PPO Maintenance Personnel/Name & Sign

Confirmed:

Name and Signature

Designation/Position

Designation/Position

ACCOMPLISHMENT

Filled in by PPO Personnel

Conducted by :

PPO Maintenance Personnel
(Name and Signature)

Date & Time Started :

Date & Time Finished :

Checked & verified :

PPO Head/Director
(Name and Signature)

Notes:

Filled in by Requesting Party

Service Satisfaction

- ☐ 1. Not Satisfied
☐ 2. Slightly Satisfied
☐ 3. Moderately Satisfied
☐ 4. Very Satisfied
☐ 5. Extremely Satisfied

OVER ALL RATING

- ☐ 1. Poor ☐ 2. Fair
☐ 3. Good ☐ 4. Very Good
☐ 5. Excellent

Comments & Suggestion

Name & Signature

Designation/Position