



PHYSICAL PLANT SERVICE REQUEST FORM

Filled in by requesting party		Filled in by PPO	
Date filed	: April 1, 2022	Date received	:
Building/Facility/ House No/ Apartment No./ Department	: Advanced Research and Innovation Center	Received by	:
Location	: VSU Upper Campus		Name & Signature
Requesting party	: Jo Jane D. Atok	Designation/ Position	:
Designation/ Position	: Instructor	Maintenance control number	:

To be accomplished in three (3) copies

Please check and specify the nature of service request

☐ Audio System (amplifier, speakers and microphones) With Lights? Yes. ___ No. ___ Setup Location: _____ Date & Time Needed: _____ Estimated Duration (hrs): _____	☐ Tent installation/s Setup Location: _____ No. of tent: _____ Tent size: _____
☐ Land preparation, plowing & harrowing Location/Area covered: _____ Estimated passing trip: _____	☐ Fabrication/s (new cabinets, furniture, metal works and other fabrications not considered as repair and maintenance) Installation/s (tarpaulin, signage, new lock & knobs & other installation not considered as repair and maintenance)
☐ Site development, levelling, scrapping & backfilling Location: _____	☐ Machining works (lathe, shaper, drill press & etc.)
☐ Hauling (Construction materials, office equipment & etc.) From: _____ To: _____	☐ Others (specify): <u>Plumbing</u>

Brief Description of Service Request

Adjust drainage system for the installation of Lab safety shower and eyewash and install pipes and water lines for equipment.

Service Conducted by : _____
 Name & Signature

PPO Unit : _____

Conformed by
(Requesting Party) : **JO JANE D. ATOK**
 Name & Signature

Checked by
(PPO Unit Head) : _____
 Name & Signature

To be filled by the requesting party after service request conducted

Overall Service Satisfaction

1. Not Satisfied

2. Slightly Satisfied

3. Moderately Satisfied

4. Very Satisfied

5. Extremely Satisfied
