

# Lowndes County Public School Service Request

School/Dept. \_\_\_\_\_

Request Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Requested by \_\_\_\_\_

Signature \_\_\_\_\_

(Principal/Dept. Head)

(Principal/Dept Head)

## I. Service Codes (Circle Appropriate Letter)

A. Air Conditioning

F. Cooler/Freezer

K. Heating

P. Plumbing

B. Carpentry

G. Doors/Locks

L. Lighting

Q. Security Equipment

C. Carpet

H. Electrical

M. Moving/Hauling

R. Stove/Oven

D. Ceilings

I. Equipment Disposal

N. Paving/Striping

S. Walls

E. Computer/Technology

J. Grounds

O. Pest Control

T. Other

## II. Description of Work To Be Performed (Use Separate Service Request For Each Code)

*To Be Completed by Technician*

## II. Materials and Supplies (Asterick denotes in-stock items)

Purchase Order Number \_\_\_\_\_

Vendor Name \_\_\_\_\_

Address \_\_\_\_\_

Quantity	Model #	Item	Price	Extended Price

## IV. Worked Performed

Date: \_\_\_\_\_

Start Time: \_\_\_\_\_

Start Time: \_\_\_\_\_

Start Time: \_\_\_\_\_

End Time: \_\_\_\_\_

End Time: \_\_\_\_\_

End Time: \_\_\_\_\_

Comments \_\_\_\_\_

## V. Validation

Date Work Completed \_\_\_\_\_

Signature of Person Requesting Work \_\_\_\_\_ Signature of Technician \_\_\_\_\_

(Sign only if job is completed)