

REQUEST FOR IMPROVEMENT SERVICES

Site: _____ Date: _____
To: Maintenance Department

Site No: _____
Fiscal Year: 2021/22

Estimate Only – maintenance will estimate and send back for approval within two (2) weeks. The estimate is valid for two (2) months.

The following work is requested:

Justification:

Requestor: _____

Estimate Approved by Requestor: _____

Title: _____

Phone no: _____

Date of Request: _____

(Please complete budget of the following)

(Fund #010)

010					5720				
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					5760				
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(OTHER)

Signature of Site Administrator _____

(I agree to keep the funds in this budget and object code until an internal journal entry is made to pay for this project upon completion). For further assistance contact Stanley 535-7057 . Return this request with a budget report

“No later than April 30th”

FOR MAINTENANCE USE ONLY

MAINTENANCE ESTIMATE:

Shop: Carpentry ___ Electric ___ Telecom ___ Glazing ___ Heat ___ Locksmith ___
 Sheet/Metal ___ Paving ___ Plumbing ___ Painting ___ Roofing ___ Alarm ___
 Gardening ___

Date of Request: _____

Estimated Material Cost: \$

Approved by Director/Manager: _____

Estimated Labor Cost: \$

Contract / Maintenance: _____

Total Estimated Cost:

Internal Billing No: _____

Est. Complete Date: _____