**THIS FORM MUST BE COMPLETED AND HAVE COMMISSIONER APPROVAL BEFORE ANY WORK WILL BE DONE (EXCEPTION FOR LEAKS ETC.)**

# MAINTENANCE REQUEST FORM

**FOR: ____ MAINTENANCE** **BUDGET LINE:_____**
**____ NEW CONSTRUCTION**
**____ REMODEL**

**____ TELEPHONE**

DATE: _____ DEPARTMENT: _____

EXPLANATION OF REQUEST: (Attach additional sheet if necessary)

_____
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Contact Person: _____ Date needed by: _____

Department Head Approval: _____

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**Commissioner Authorization**

Request Approved: _____ Request Denied: _____ Request #:_____

Commissioner Initials: _____