



FACILITY WORK ORDER

To Plant Operations at: Campus: _____ Date: _____

Division Requesting Work: _____ Requested by: _____

Work Request Assigned to: _____

Location of work area or room no.: _____

When will work area be available: Day: _____ Date: _____ Time: _____

Deadline for completion: Day: _____ Date: _____ Time: _____

Description of work:

Estimated Cost: Materials: _____ Labor: _____

Account / Cost Center to be charged: _____ / _____

Cost Center Manager: _____ Date: _____

Plant Operations Approval: _____ Date _____

PLANT OPERATION USE ONLY

Job Started: Date: _____ Time: _____

Job Completed: Date: _____ Time: _____ Total Hrs.: _____

Work completed by: _____

Comments: _____
