

TELLER COUNTY FACILITIES DEPARTMENT

Maintenance Request Form

Department: _____ Signature of Dept. Head: _____

Date: _____ Requested time frame: _____ **Problem** (describe in detail): _____

Below line for Facilities use:

Priority: _____ (1 - Life Safety) (2 - Critical system failure)
(3 - Const./remodels) (4 - requests affecting workplace efficiency)
(5 - All other requests)(**priority assigned by Facilities Dept.**)

Building number/system ID: _____

Negotiated completion date (NCD): _____

Work performed: _____

Starting Date: _____ **Completion Date:** _____

Work Performed By: _____ **Hours:** _____

All work will be done during regular working hours, with the exception of emergencies. Work will be scheduled according to assigned priority and NCD agreed upon with requestor.

No building structural or systems work is to be performed in or on County Buildings without contacting the Facilities Dept.

To contact the Facilities Dept. call 689-0613 or 689-2969

AFTER-HOURS EMERGENCIES CALL/PAGE THE ASSIGNED ON-CALL PERSONNEL OR THE SHERIFF'S OFFICE DISPATCH CENTER AND THEY WILL CALL FACILITIES PERSONNEL.