



One University Circle, Turlock, CA 95382 • Tel: (209) 667-3211 • Fax: (209) 667-3303 • Email: Facilities_Services@csustan.edu

FACILITIES SERVICES WORK ORDER REQUEST

Date	Name of Requestor	Phone Ext.	Email	Building & Room
------	-------------------	------------	-------	-----------------

Department	Account	Fund	Dept.	Program	Project	Class	Estimate Required Yes No
------------	---------	------	-------	---------	---------	-------	----------------------------------

Department Approval (Signature required)	VP Approval (Required for all work orders over \$5,000)
--	---

Name of Contact Person	Phone Ext.	Email	Please Indicate Critical Date
------------------------	------------	-------	-------------------------------

Work or Service Requested: (Be brief; make a rough drawing if needed to explain request.)

****Please note that any alterations involving moving walls and doors and/or any change in room classifications require the approval from the Campus Building Official. Cost of drawings and plan checks will be paid by requesting department. All work orders over \$5,000.00 require VP approval.****

Please Include a Recycling Bin