



Work Order Number

Department of Physical Plant Work Order

Email: wcontrol@mail.sdsu.edu Phone: 44754 Fax: 41711

1 Requesting Department			2 Name of Requestor			3 Date		
4 Requestor Email Address		5 Mail Code	6 Phone Number		7 Alternate Contact		8 Phone Number	
9 Location of Work (Building)			10 Room Number			11 Date Needed / Event Times		

12 Complete Description of Project (Attach drawings or additional sheets if necessary.)

13 Justification (Must be completed for priority work)

14 Authorized Signature		Date	<input type="checkbox"/> Estimate <input type="checkbox"/> Final Approval	15 Account Number or Billing Information	
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(PHYSICAL PLANT USE ONLY)

Special Approvals Received		<input type="checkbox"/> Digging Permit Required		<input type="checkbox"/> In House		<input type="checkbox"/> Contract		<input type="checkbox"/> General Fund		<input type="checkbox"/> Special Repair	
EHS <input type="checkbox"/> DSS <input type="checkbox"/> AAF <input type="checkbox"/>											
FPM <input type="checkbox"/> PS <input type="checkbox"/> _____ <input type="checkbox"/>		<input type="checkbox"/> Drafting Required		<input type="checkbox"/> Service Agreement		<input type="checkbox"/> New Work		<input type="checkbox"/> Auxiliary Fund		<input type="checkbox"/> Minor Cap	

Estimated Cost:					Date of Estimate:					Final Cost:				
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Carpenter	Paint	Lock	Electric	Plumbing	Support Team	Chill Plant	HV	PM	NM	Grounds	IR	Custodial	Sign	PG	
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