MAINTENANCE WORK ORDER REQUEST FORM

Instructions for Requesting Department: Please fill out Sections 1 through 4 completely for any maintenance, facility repair, equipment, or groundskeeping requests. Submit the completed form to the **Office of the Town Administrator** via email or physical drop-off. For emergency situations involving immediate hazards to life, safety, or critical town infrastructure (e.g., active water leak, power outage, gas odor), contact the **Town Administrator immediately** after or concurrently with form submission.

Section 1: General Information & Originator Details

Submitting Department:	[e.g., Library, Highway, Police, Fire, School]	**Date of Request:**	[MM/DD/YYYY]
Department Head / Requestor:	[First and Last Name]	**Title / Position:**	[Staff Title]
Department On-Site Liaison:	[Name of staff contact for vendor escort & site access]	**Contact Phone / Cell:**	[Direct Extension / Cell Phone]
Department Head Approval:	[Signature / Initial]	**Account / Fund Code:**	[Department Budget Code (if known)]

Section 2: Request Classification & Location

Work Category (Check all that apply)			
[ ] Building / Structural	[ ] Electrical	[ ] Plumbing	[ ] HVAC / Temperature Control
[ ] Grounds / Landscaping	[ ] Key / Lock / Security	[ ] Custodial / Cleaning	[ ] Vehicle / Heavy Equipment
[ ] Carpentry / Painting	[ ] Safety / Hazard Remediation	[ ] Appliance / Fixture Repair	[ ] Other (Specify below)

Location Details	
Facility / Building Name:	[e.g., Town Hall, M.N. Spear Memorial Library, Highway Garage, Fire Station, Shutesbury Elementary School]
Specific Room / Area / Floor:	[e.g., Main Office, Restroom, Basement Mechanical Room, Parking Lot]
Asset / Equipment Tag ID (if applicable):	[ID number on equipment/appliance if tagged]

Section 3: Request Prioritization

Priority Level	Description & Criteria	Initial Handling / Response Action
[ ] Emergency	Active water main breaks, gas leaks, complete power failure, structural hazards, or severe safety threats.	**Immediate Action:** Triage within 2 hours; emergency contractors or town staff dispatched immediately.
[ ] High / Urgent	Partial HVAC failure, compromised security/locks, or issues causing direct disruption to public operations.	**Prioritized Dispatch:** Reviewed within 24 hours; scheduled with next available qualified contractor/staff.
[ ] Medium / Standard	Routine plumbing issues (dripping taps), burnt-out lighting fixtures, non-critical door alignment, or general facility upkeep.	**Batch / Queue Handling:** Queued for standard maintenance visits, grouped with similar tasks, or scheduled around vendor availability.
[ ] Low / Scheduled	Seasonal painting, cosmetic touch-ups, minor office furniture adjustments, or preventative maintenance projects.	**Planned / Seasonal Work:** Evaluated during annual planning, deferred to seasonal lulls, or addressed as resources permit.

Section 4: Detailed Request Description & On-Site Access

Description of Issue or Request: *Please provide a thorough description of the problem, including specific symptoms (e.g., noise, leaking, electrical outage), when the issue started, and any potential causes or safety hazards. Attach photos if available.*
On-Site Access & Scheduling Responsibilities (Department Responsibility): *Specify preferred work hours, quiet hours, key/keycard access arrangements, and the designated department staff member who will meet, escort, and oversee the vendor on-site.*

Section 5: Town Administration & Building Committee Use Only

Work Order Administrative Tracking			
Work Order # Assigned:	[e.g., WO-2026-001]	**Date Received:**	[MM/DD/YYYY]
Target Routing:	[ ] Highway Staff [ ] Approved Licensed Contractor (Vendor: _____)		
Building Committee Reviewer:	[Name / Liaison]	**Status:**	[Pending / In Progress / Completed]

Cost & Resource Summary			
Labor Hours	**Parts / Materials Cost**	**Contractor Cost**	**Total Cost**
[Hours]	$ [0.00]	$ [0.00]	$ [0.00]

Resolution Notes & Final Closeout Verification
Technician / Vendor Resolution Summary:

Review Step	Attestation / Verification	Signature & Date
1. Dept. Head Inspection	Site access provided; work inspected & area left operational.	Signature: _____ Date: _____
2. Building Committee	[ ] **Waived** *(Repair cost under $500)* [ ] **Approved** *(Technical standards met)*	Signature: _____ Date: _____
3. Town Administrator	Final payment processing & work order closeout approved.	Signature: _____ Date: _____