



# WORK ORDER

Community Association     A11/13     B3/5     C7/9

DATE FORMAT: MM/DD/YYYY

TIME FORMAT: HH:MM

## 1. GENERAL INFORMATION

Building \_\_\_\_\_ Unit \_\_\_\_\_

Date of Request: \_\_\_\_\_

Requested by: \_\_\_\_\_  
PLEASE PRINT

Contact Phone: \_\_\_\_\_

## 2. DESCRIPTION OF SERVICE REQUEST

HVAC     Plumbing     Electrical     Paint     Other

PLEASE SPECIFY

Details: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## COMPLETION

By Staff     By Vendor \_\_\_\_\_

By: \_\_\_\_\_ Date \_\_\_\_\_  
PRINT NAME

Cape Haze Resort

By: \_\_\_\_\_ Date \_\_\_\_\_  
PRINT NAME

## 3. SERVICE SCHEDULE

By (Employee): \_\_\_\_\_

Date to be Completed: \_\_\_\_\_

By Staff     By Vendor \_\_\_\_\_

### Follow Up #1:

By (Employee): \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_ Spoke w/ \_\_\_\_\_

Result:  Rescheduled    Date \_\_\_\_\_

Incomplete (explain) \_\_\_\_\_

Complete    Date \_\_\_\_\_ Notes \_\_\_\_\_

### Follow Up #2:

By (Employee): \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_ Spoke w/ \_\_\_\_\_

Result:  Rescheduled    Date \_\_\_\_\_ Notes \_\_\_\_\_

Incomplete (explain) \_\_\_\_\_

Complete    Date \_\_\_\_\_ Notes \_\_\_\_\_