

Work Order Request #

(For Internal Use Only)

Liberty County Board of Commissioners
Building Maintenance Department
Phone: (912) 876-2543 or (912) 876-4509
Fax: (912) 876-4523

PLEASE SEND TO:
Hannah Carmon
PT Administrative Clerk
Building Maintenance Dept.
hannah.carmon@libertycountyga.com

**GOVERNMENT BUILDINGS/GROUNDS
WORK ORDER REQUEST**

DATE REQUESTED:

FROM:

DEPT:

^ Name of authorized personnel submitting request ^

^ Department number and name of department ^

I. DESCRIPTION/SPECIFICS OF WORK TO BE PERFORMED:

*Note: Attach sketch with dimensions for items requiring construction or modification to existing structures.
Indicate any special requirements and considerations to include materials and/or scheduling.*

SPECIAL PROJECT-ESTIMATED COSTS: \$ Funds available in current fiscal year?

CHARGE SPECIAL PROJECT COSTS TO: FUND# _____ DEPT# _____ ACCOUNT# _____

II. I HEREBY CERTIFY THAT THE WORK SPECIFIED ABOVE IS NECESSARY FOR THE EFFICIENT OPERATION OF THIS DEPARTMENT:

Dept. Head/Elected Official Signature

Contact Phone Number

-----↓FOR SPECIAL PROJECTS/ESTIMATED COSTS ONLY↓-----

III. I HEREBY APPROVE THAT THE ESTIMATED COST OF THE PROJECT SPECIFIED ABOVE IS NECESSARY FOR THE EFFICIENT OPERATION OF THIS DEPARTMENT (PLEASE CONTACT THE BUILDING MAINTENANCE DEPARTMENT IF YOU NEED ASSISTANCE WITH THIS ESTIMATE):

Dept Head/Elected Official Signature

Contact Phone Number

-----Do Not Write Below This Line: for Internal Use Only-----

IV. Comments from Building Superintendent: _____

APPROVED/ DISAPPROVED (circle one) **By: Jerry Johnson, Superintendent** Date: _____

V. Name of Service Technician (please print): _____

Work Performed: _____

Total Labor: Hours _____ Minutes _____ Date Completed: _____