

PROPERTY MANAGEMENT WORK ORDER

Today's Date:

CONTACT INFORMATION

Name:

Department:

Email:

Phone:

WORK ORDER INFORMATION

Location:

Include address, room information, and any special instructions for accessing the location.

Task Type:

Custodial

HVAC

Other:

Electrical

Pest Control

Equipment

Plumbing

Grounds

Safety & Security

Priority:

Low

Medium

High

Emergency

Description of Task and Materials:

Include details of the task or repair and materials, parts, or tools needed, if known.

Recommended Service
Window:

Include days of the week and time windows (not guaranteed).

Task Due Date:

TASK COMPLETION DETAILS

Approver:

Approval
Signature:

Technician
Assigned:

Date Completed:

Description of Work Completed:

Supplies or Parts Used:

Cost: