

REQUEST FOR SERVICE

PLAISTOW BUILDING MAINTENANCE DEPARTMENT

Date:_____ Requestor:_____ Phone/Ext:_____

Department:_____ Location: _____

I /We are submitting the following request for services from your department.

Description of problem, opportunity or reason for request:

Please provide as much detail as possible including expectation and completion date needed.

Return this request to the Building Maintenance Supervisor and Board of Selectmen Administrative Assistant for review, approval and reservation of staff and facilities. Return to Jim DeBonis & Beth Hossack in person at Town Hall or email to jdebonis@plaistow.com & bhossack@plaistow.com. A confirmation will be provided to the requestor.

The service requested:	Service Description
<input type="radio"/> Special Cleaning Request	
<input type="radio"/> Facilities Use - Time: Attach diagram of room set up	
<input type="radio"/> Equipment Needed	
<input type="radio"/> Laborer Needed	
<input type="radio"/> Relocation	
<input type="radio"/> Procurement/Purchase	

Signed: Building Maintenance

Signed: Town Manager

Diagram/Room Layout