

**OKOLONA FIRE DEPARTMENT
WORK REQUEST FORM**

Be Sure to include Unit Number or specific location of problem

Section one – To be completed by person requesting work

Clearly state the problem or explain what needs to be done:

Person Requesting Work: _____ **Date (mm/dd/yy):** _____

Check Requested Priority: **High** **Medium** **Low*** **Time (00:00):** _____

Section Two – To be completed by Fire Chief

Person Assigned Work: _____ **Date (mm/dd/yy):** _____

Check Assigned Priority: **High** **Medium** **Low*** **Time (00:00):** _____

**Section Three – To be completed by person assigned work, upon completion of work
Can also be used as a follow-up report**

Work Completed Report: **Progress Report:**

Describe what was done or what is being done:

Person Assigned Work: _____ **Report Date (mm/dd/yy):** _____

Date of Work Completion: _____ **Report Time (00:00):** _____

File printed copy appropriate maintenance/repair files, e-mail to requester

Priorities: High: Equipment or item needing repair is out of service and cannot be used until the repairs are made.
Medium: if work is not completed within a reasonable amount of time, there is a likelihood of the equipment becoming out of service
Low: Work can be deferred until next scheduled regular maintenance

Follow Up Responsibilities:

Person Assigned: If you are unable to complete the requested work in 7 days, please attempt to speak with the person requesting work, and tell him why. If you are unable to do so, send an e-mail to the person.

Person requesting work: If the work is not done in 7 days of being assigned, and you have not been told the reason, please try to contact the person assigned the work. If you are unable to get with the person assigned, please let the fire chief know within 72 hours.