



PUBLIC WORKS – FACILITIES

SERVICE REQUEST FORM

This completed form must be emailed to the Facilities Department prior to any service being provided; no other method will be processed (e.g. phone calls), unless it is a maintenance emergency!

Facilities Management
Email **ALL SERVICE REQUESTS TO**
facilitiesmanagement@co.imperial.ca.us
Phone: (442) 265-1823

Date: _____

Department: _____

Requested By: _____

Account No: _____

Phone: _____

Authorizing Supervisor: _____
(Signature)

CEO Approval: _____
(Signature)

❖ **Location** (Site address & name of dept.)

❖ **Work Request Type** (Please be detailed)

| | |
|-------------------------|-------|
| Electrical: | _____ |
| Air Conditioner/Heater: | _____ |
| Plumbing: | _____ |
| Structural: | _____ |
| Other: | _____ |

| | | | |
|---------------------|-----------------|--------------|-------------|
| Completed By: _____ | Date: _____ | Dept.: _____ | Date: _____ |
| Signature: _____ | Signature _____ | | |

FM Supervisor Approval: _____

Priority: ☐ Urgent ☐ Not Urgent