

# ACLPOA WORK ORDER

DATE: \_\_\_\_\_

WORK ORDER # \_\_\_\_\_

FROM: \_\_\_\_\_ TELEPHONE # \_\_\_\_\_  
(PERSON REQUESTING WORK TO BE DONE)

EMAIL \_\_\_\_\_ LOT NUMBER \_\_\_\_\_

WORK REQUESTED:

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ISSUED TO : \_\_\_\_\_ DATE ASSIGNED: \_\_\_\_\_ GM SIGNATURE: \_\_\_\_\_

Maintenance Department \_\_\_\_\_

Committee \_\_\_\_\_

Return to Property Owner for more information (state what is needed):

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Property Owner Response:

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ESTIMATED COMPLETION DATE: \_\_\_\_\_

SAFETY ISSUE \_\_\_\_\_ (YES OR NO)

PROPERTY OWNER NOTIFIED OF STATUS IF MORE THAN TWO WEEKS? \_\_\_\_\_ (TIM TO NOTIFY)

WHY ARE WE UNABLE TO COMPLETE:

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EVERY EFFORT WILL BE MADE TO COMPLETE WORK REQUESTED. ALL REQUESTS  
WILL BE EVALUATED FOR URGENCY AND SCHEDULED ACCORDINGLY. IF REQUESTS  
ARE DENIED YOU WILL BE NOTIFIED AS TO THE REASON.