BCE MULTI-CRAFT JOB ORDER							JOB ORDER NO.			
COST CENTER	COLLECTIO WORK ORDER NO.	FACILITY NO.	DATE PREPARED							
NAME OF INSPECTOR (Last, First, Middle Initial)	USING AGENCY	INDIVIDUAL TO CONTACT (Name and Telephone NO.)								
WORK DESCRIPTION	LOCATION	MATERIALS		WORK	M/HR EST.	CRAFT	INCOM- PLETE			
WORK DESCRIPTION	LOCATION	OCATION ITEMS QNT	QNTY	CODE	EST.		WORK			

NAME OF INSPECTOR (Last,		USING AG	JENCY		INDIVIDUAL TO CONTACT (Name and Telephone NO.)									
							MATERIALO							
WORK DESCRIPTION			LOCATION		MATERIALS ITEMS QNTY		WORK ID CODE	M/HR EST.	CRAFT	INCOM- PLETE WORK				
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		CARP	PLUMB	ELEC	PAINT		OTHER		TOTAL		TOTAL	ACT		
TOTAL ESTIMATED HOURS			11						HRS					
REMARKS														
SIGNATURE OF INSPECTOR														
DATE ASSIGNED	AUTHORI	ZING SIGN	ATURE											
DATE COMPLETED	SUPERVIS	SOR'S SIGN	IATURE											