



920 Barlow Road - Fort Morgan CO 80701

PHYSICAL PLANT MAINTENANCE WORK ORDER

Date: _____

Requested by: _____

Building/Room: _____

Description of Needs: _____

Org. to be Charged:

Estimated Cost Amount:

Supervisor Approval: _____ Date: _____

VP of Administration Approval: _____ Date: _____

Work Completed by: _____ Date: _____

Return completed form to Administrative Services

Rev 5/01