

DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY <b>TEMPORARY HOUSING UNIT MAINTENANCE WORK ORDER</b>				1. UNIT No.		2. CONTRACTOR		3. WORKORDER	
<b>4. OCCUPANT INFORMATION</b>				<b>MAINTENANCE REQUEST INFORMATION</b>					
NAME			PHONE No.		RECEIVED			RECEIVED BY:	
ADDRESS (House No. & Street Name, or Pad & Park)			Date		Time <input type="checkbox"/> a.m.				
					Time <input type="checkbox"/> p.m.				
CITY AND STATE			COUNTY		OCCUPANT AVAILABLE			PERMISSION TO ENTER <input type="checkbox"/> Yes <input type="checkbox"/> No	
					Date				
					Time <input type="checkbox"/> a.m.				
					Time <input type="checkbox"/> p.m.				
5. DESCRIPTION OF MAINTENANCE PROBLEM(S)									
PROBLEMS PREVIOUSLY REPORTED? <input type="checkbox"/> Yes (Give details) <input type="checkbox"/> No									
<b>6. WORK ORDER ISSUE INFORMATION</b>									
ISSUED TO CONTRACTOR (Contractor or DHS/FEMA Technician)				ISSUED	DATE	TIME	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	ISSUED BY	
<b>7. DESCRIPTION OF WORK COMPLETED</b>								<b>DATE COMPLETED</b>	
<b>8. SIGNATURES</b> (Certification that the above described work has been completed and inspected) NOTE: Provide copies to Occupant									
MAINTENANCE TECHNICIAN(S)								DATE	
SIGNATURE OF OCCUPANT				DATE		SIGNATURE OF CONTRACTOR'S PROJECT OFFICER			
						DATE			
<b>9. MATERIALS</b>				<b>COST</b>		<b>10. WORK ORDER COST</b>			
						Service Call			
						Maint. Labor ( _____ @ \$ _____ /hr.)			
						Maint. Mileage ( _____ @ \$ _____ /mi.)			
						Materials			
						Deactivation			
						Tow Mileage ( _____ @ \$ _____ /mi)			
<b>TOTAL</b> _____						<b>TOTAL</b> _____			
<b>11. LABOR</b>	WORK BEGAN			DATE		TIME		<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	TOTAL HOURS (1/4 Hr. Increments)
	WORK COMPLETED			DATE		TIME		<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	
12. VERIFICATION AND SIGNATURES - The above described work has been verified by, <input type="checkbox"/> phone or <input type="checkbox"/> inspection & complies with contract									
SIGNATURE OF MAINTENANCE COORDINATOR				DATE		SIGNATURE OF PROJECT OFFICER			
						DATE			
13. CHARGE WORK ORDER TO:									
<input type="checkbox"/> Maintenance <input type="checkbox"/> Manufacture <input type="checkbox"/> Setup Contractor <input type="checkbox"/> Maintenance Contractor <input type="checkbox"/> Occupant <input type="checkbox"/> Other									

## GENERAL INFORMATION

**PURPOSE:** The temporary Housing Unit Maintenance Work Order is to document maintenance requested and performed on units at the Disaster Join Office.

**RESPONSIBILITY:** The occupant, DHS/FEMA Inspector or other responsible contracts Direct Housing Operations (DHOPs) which completes items 1 through 6. Items 7 through 9 and 11 are the responsibility of the contractor of the DHS/FEMA Technician completing the work. Item 10 is completed by the Contractor or by DHOPs in the case of DHS/FEMA Technician completed maintenance. Item 12 and 13 are checked and signed by the maintenacne Coordinator and Project Officer.

### **DISTRIBUTION.**

Original and 3 copies to Contractor or Technician.  
Copy - Unit File.

Upon completion of all maintenance work, completion of all items on the form, and review and signatures by Project Officer:

Original and 2 copies - Held temporarily in DHOPs  
Copy No. 3 - Contractor  
Copy - Staging Area Unit home file

Upon receipt of Contractor invoice, with copy No. 3 attached, the DHOPs verifies cost information and dsitributes:

Original - Fiscal  
Copy No. 1- Staging Area Maintenance Contractor File  
Copy No. 2- Storage  
Copy No. 3- Contractor  
Copy - Utilized for computer data entry

## INSTRUCTIONS

### **ITEM NO.**

3. Work Order Number. Consist of contact number plus a sequential number for each work order issue. Work issued to a DHS/FEMA Technician would have a separated sequential number prescribed by the disaster's DR Number.
5. Description of Maintenance Problem(s). Record in sufficient detail to determine priority, responsibility (if any) for problems and specifically what is malfunctioning. Note if problem has been previously reported to avoid duplication and assist in determining if warranty work involved.
7. Description of Work Completed. Record in detail to support labor hours and materials utilized.
8. Certification and Signatures. The Maintenance Technician(s) signs, date and acquires signatures and date from occupant. If the occupant is unavailable or signature, note on signature line. The Contractor's Project Officer reviews and signs work order before submission.
9. Materials. Completed by Maintenance Technican(s).
10. Work Order Cost. Completed from costs shown in contract or, work is completed by DHS/FEMA Maintenance Technician, completed from actual operations costs.
11. Labor. Completed by Maintenance Technican(s).
13. Charge Work Order To. Determined by Project Officer. Charges to manufacture, setup or maintenance contractor, or to the occupant will require follow-up initiation of backcharge procedures.

All other items are self-explanatory.