



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:

If the requested work **is** expected to have a cost associated, please use the button below to attach this form to an email. Send to the VP of Administration and type in the additional approvers email address.

If **no** cost associated, click the "Email to M&O" button below.

Org Approval: _____

VP of Administration Approval: _____

Work Completed by: _____