OPERATIONS & MAINTENANCE SERVICE REQUEST

Complete all sections and submit to Facility Manager.

SR No. (Assigned by Facility Manager)

1. **Work Description:**
   
   Room number and name: ______________________________________
   
   Work required/purpose (attach sketch or use additional sheet if required):

   ________________________________________________________________

   ________________________________________________________________

   ________________________________________________________________

   ________________________________________________________________

   Work schedule desired (be definitive; ASAP is not acceptable):
   
   Desired start date: ________ Desired completion date: ________ Drop dead completion date: ________

2. **Service requested:**
   
   ☐ Feasibility estimate ☐ Perform work ☐ Initiate Project

3. **Work and funding authorization:**
   
   Account number: ______________________________ ← OR → Task ID#: ______________________________
   
   (Financial Activity Object/Spend Category)
   
   Account holder name and signature: ______________________________ Date: ______________________________

4. **Contact Name:** ______________________________ Phone #: ______________________________

5. **LFM Approval:** ______________________________ Date: ______________________________

   The Laser Facility Manager must sign here if the Service Request scope will affect operations within the Laser Facility envelope (Laser Bay, Target Bay, LaCave, Capacitor Bays, Pumphouse, Tritium Fill, etc.).

6. **Service Request Action** (to be completed by Facility Manager):
   
   ☐ Project within capability of LLE O&M. Estimated man days: ________ Estimated start date: ________
   
   ☐ Project requires University Facilities or outside contractor support. Expect one month before work starts.

   ☐ Request rejected (state reason): ________________________________________________________________

7. **Distribution:**
   
   ☐ Sawyer ☐ Puth ☐ Janezic ☐ __________
   
   ☐ Sanford ☐ Stagnitto ☐ Goheen ☐ __________
   
   ☐ Carnahan ☐ Canning ☐ Agliata ☐ __________

8. **Does this project or work require IT or Network support?** Please circle Y or N