

SUNFISH BAY CONDOMINIUM ASSOCIATION, INC.

WORK ORDER REQUEST FORM

This form may be completed by the Unit owner and/or a SFB Board Member.

Completed work orders must be reviewed and signed by a SFB Board Member. Email Finalized Forms to the designated Board Member.

WORK ORDER NUMBER _____ (Assigned by Ameritech)

Today's Date _____ Time _____ AM ___ PM ___

Requestor's Name _____ Unit # _____

Service Location if other than Owner's unit _____

Phone _____ Email _____

Description of work to be Completed _____

Unit Owner Signature _____ Date _____

Board Member Signature _____ Date _____

Account to be charged per Building Rep — Owner _____ Bldg _____ Master _____

If Bldg or Master - Recommended account # to be charged _____

Management Use Only

Requisition Number _____

Work Order Authorized - Yes _____ No _____

Assigned to Property Maintenance - Yes _____ No _____

If not - Contractor/Vendor assigned _____

Work Order Notes _____

Expected Start Date _____ Expected completion Date _____ Check # _____