

WORK ORDER



KETCHIKAN GATEWAY BOROUGH
PUBLIC WORKS DEPARTMENT
1900 FIRST AVENUE
907/228-6733 • fax 907/228-6684

DEPARTMENT NAME:	
DATE	
WORK ORDER #	
CONTACT PERSON	
DIRECTOR APPROVAL	

COORDINATING INFORMATION	
FACILITY / VEHICLE	
GL BILLING CODE (XXX-XX-XXX-XXXX)	
REQUIRED COMPLETION DATE	
DESCRIPTION OF WORK REQUIRED	

Please complete the above information. This form must be emailed to Mike Carney at mikec@borough.ketchikan.ak.us and cc'd to Ric Boyd at ricb@borough.ketchikan.ak.us or faxed to 228-6684. If you have any question, call 228-6733.

FOR PUBLIC WORKS USE ONLY			
DEPUTY DIRECTOR OF PUBLIC WORKS APPROVAL: _____		DATE: _____	
(CIRCLE YOUR DEPT)	MAINTENANCE	GROUNDS	CENTRAL GARAGE
COMMENTS: _____			
DATE STARTED: _____		DATE COMPLETED: _____	
STAFF INTIALS: _____			
ESTIMATED TIME ON THE JOB: _____		HOW MANY EMPLOYEES WERE ON THE JOB: _____	
<i>Form Revision Date: 1/14/11</i>			