# Request for Service/Warranty Repair

(1 Service Technician plus 1 vehicle)

|  |  |
| --- | --- |
| rectangle-red To: Matt Cooley Email: mcooley@oneworkplace.com Phone: 510.729.7841 NOTE: All areas in RED are to be completed to process this request |  d |
| **Date:**  |  |
| **Submitted by:** |   |
| **Phone Number:** |  |

### Location of Work to be Performed

|  |  |
| --- | --- |
| Company Name: |   |
| Customer OWP Account Number: |   |
| Customer Requisition or Purchase Order Number:  |  |
| Street Address |  |
| City and State |  | **Zip Code:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Building Number |  | **Station/Room Number:** |   |
| **Contact Name:** |   | **Phone Number:** |   |
| **Alternate Contact Name:** |  | **Phone Number:** |   |

#### List of Services Provided through Service

|  |  |  |  |
| --- | --- | --- | --- |
|  | Minor Furniture AdjustmentsGrommet Hole DrillingFurniture Systems Electrical Repair |  | Chair RepairErgonomic IssuesFurniture Lock Repair ReplacementPanel cleaning, fabric protection, and parts. |

**Work to be Performed (Detailed Description)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Manufacturer:** |   | Ship Date: |  |
| Acknowledgement Number: |   | Finishes: |  |
| Model Number: |   | Quantity: |  |

**Special Instructions:**

|  |
| --- |
|   |
|  |
|  |

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parts if required can take approximately 3.5 weeks to 4.5 weeks depending on vendor.**

**Minimum Service is 3 hours at $48.00 per hour. Non-warranted items will be billed.**