

# Maintenance Complaint Form

School/Facilities:

Date:

Requested By:

Fax ( )

**\*\*\*NOTE\*\*\* Only one request per document. Multiple requests on same document will be voided.**

Please provide detailed description below of maintenance request. Please be specific indicating location, room #, or hallway.

Please indicate number of infraction:      First Time: \_\_\_\_\_      Second Time: \_\_\_\_\_

Description of problem:

\_\_\_\_\_ Bathroom Not cleaned      \_\_\_\_\_ Boys      \_\_\_\_\_ Girls      \_\_\_\_\_ Hall

\_\_\_\_\_ Chalk tray not cleaned

\_\_\_\_\_ Dusting needed

\_\_\_\_\_ Floors dirty

\_\_\_\_\_ Hallway Not cleaned

\_\_\_\_\_ Soap not in bathrooms

\_\_\_\_\_ Paper towels needed in bathroom

\_\_\_\_\_ Trash can not being emptied

\_\_\_\_\_ Windows dirty

\_\_\_\_\_ Other (If other is selected please provide details):

Custodial Supervisor Signature: \_\_\_\_\_

Administrators Signature: \_\_\_\_\_