

SEND INVOICE TO:

CLS Facility Services

8061 Tyler Boulevard, Mentor, Ohio 44060 www.clsfacilityservices.com

Phone 800.548.3542 • Fax 800.615.0174

SERVICE WORK ORDER

SERVICE LOCATION TO BE SERVICED

SCOPE OF WORK

CLS P.O. # NOT TO EXCEED \$

WORK DONE PER SCOPE				,
-				
x				
ADDITIONAL WORK PERFORMED THIS TRIP	MEHR	S		
PENFUNIWED THIS THIP				
		R APPROVAL ABOVE YOUR NTE.		
QTY CONTRACTOR-MATER	RIALS USED QTY	CLS-MATERIALS USED	QTY CUSTO	MER MATERIALS USED
2				
		*		
, , , , , , , , , , , , , , , , , , ,				
DEDLAGED DARTICS LINDER WARDS	NTVO DVEC DNO	DI FACE FILL IN INFORMA	ATION FOR EACH UNIT WORKED	ON
REPLACED PART(S) UNDER WARRA			FILTERS	
MFG			FILTERS	
MFG.			FILTERS	
MFG.			FILTERS	
TECHNICIAN	EQUIPMENT	DESCRIPTION	TYPE OF CALL	
□ JOURNEYMAN	ROOFTOP	COOLING	□ CONTRACT	PLUMBING
☐ APPRENTICE ☐ HELPER	☐ CENTRAL ☐ WATER COOLED	☐ HEATING ☐ GAS	☐ T & M ☐ EMERGENCY	☐ REFRIGERATION ☐ GENERAL REPAIR
	☐ AIR COOLED	□ ELECTRIC		
SERVICEMAN'S NAME		HELPER'S NA	ME	
TRAVEL TIME	TIME IN	TIME OUT	TOTAL HOURS	
BEFORE LEAVING LOCATION, CALL CLS TO REPORT:				
□ JOB COMPLETE		OUR TEL	OUR TELEPHONE NUMBER STORE STAMP	
□ JOB NOT COMPLETE □ ADDITIONAL WORK NEEDED		200	548.3542	
			O-TOTOUTE	

CUSTOMER SIGNATURE
WHITE - CLS COPY

PLEASE DO NOT SIGN UNLESS ALL SHADED AREAS ARE COMPLETE

GREEN - CONTRACTOR COPY

I FULLY UNDERSTAND THE SERVICE WORK PERFORMED AND IT HAS BEEN COMPLETED TO MY SATISFACTION

PINK - STORE COPY

DATE