Macquarie Engineering & Technical Services (METS)

SERVICE REQUEST

Office or Division/Department:

Intra-Dept. Section (Optional):

Dept. specified categories, e.g. Admin., Teaching, Project X etc.

Client Ref. **Date** **Date Req'd.**

"ASAP" is not acceptable

Client Name

Phone **Email**

Fax

Alternate contact name & number (optional):

Bldg, Room

Account to be charged (Labour) Name:

Number: **5 2 7**

Account to be charged (Materials) Name:

Number: **5 1 2**

Job Description: *(if repair, please give details of make/model and plant number)*

Request authorised by:

Please use separate forms for unrelated items.
Please use METS Engraving/Signage Request form (*available at http://www.mets.mq.edu.au*) if appropriate.

Fax to x7196 or mail to the Manager METS, Building F9B