RM Work Order no: 1382900.01

|  |  |
| --- | --- |
| Wills Hall X - Z | RM Priority 5- Within 1 month |

**Work location**  **Requestor / On behalf of**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Site** | Stoke Bishop Campus |  | **Requestor** | Tracey Brooks |
| **Building no.** | 0290 |  | **Contact** | (0117) 455 8645 |
| **Building name** | Wills Hall X - Z |  | **E-mail** | Tracey.Brooks@bristol.ac.uk |
| **Space** |  |  | **Charge code** | University of Bristol |
| **Space type** |  |  | **On behalf of** | Tracey Brooks |
| **Asset name** |  |  | **Contact** | (0117) 455 8645 |
| **Asset code** |  |  | **Email** | Tracey.Brooks@bristol.ac.uk |

**Key dates**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date raised** | **Date requested** | **Priority** | **Target date** |
| 16/05/2025 15:05 |  | RM Priority 5- Within 1 month | 16/06/2025 15:05 |

**Work allocation**

|  |  |  |
| --- | --- | --- |
| **Trade** | **Maintenance Team / Supplier** | **Allocated to** |
| Contractor | BPM Contracting Services Ltd |  |

**Work details**

|  |
| --- |
| **Task : Building Fabric Disturbance** |
| Customer Comment:  BPM to attend site for inspections & quotes of crack in corner of wall of X building.  Internal Comment: |
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**To be completed by operative**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Customer contacted on arrival 🗹 | 🞏 | Customer NOT contacted on arrival 🗹 | | 🞏 | Customer contacted on Leaving 🗹 | 🞏 | Customer NOT contacted on Leaving 🗹 | | | 🞏 | Name of person contacted | | |  |
| Record first response time for the work order | | | | | | | | | | | | | | |
|  | | | | | | | | Response Date  .... / .... / ....... | | | | | Response time  ...... : ....... | |
| Sign off when work order is completed | | | | | | | | | | | | | | |
| Operatives Signature  ……………………………… | | | Print Name  …………………………….. | | | | | | Completion Date    ...... /..... / ....... | | | Completion time    ....... : ........ | | |
| Further Work Orders required? | | | | | | | | | | | | | | |
| **To be completed by supervisor** | | | | | | | | | | | | | | |
| Supervisors Signature  ……………………………… | | | Print Name  …………………………….. | | | | | | Date ...... /..... / ....... | | | | | |