

MAINTENANCE INQUIRY/COMPLAINT FORM

DATE: _____ TAKEN BY: _____

RECEIVED FROM: _____ TIME: _____

COMPANY: _____ GIVEN TO: _____

PROBLEM/COMPLAINT: _____

CORRECTIVE ACTION TAKEN: _____

OBPA (Name) : _____ PARTS \$ _____ MANHOURS SPENT: _____

OR

OUTSIDE VENDOR (Name) : _____ COST \$ _____

COMMENTS: _____

Copy Distribution: White - **Director of Operations**
Yellow - **Principal Stenographer**
Pink - **Finance Department**