

Equipment Maintenance Request Form

Requestor Information

- Name: _____
- Contact Number: _____
- Email Address: _____
- Department/Unit: _____

Request Details

- Date of Request: _____
- Equipment Name/ID: _____
- Issue/Problem Description:

Please describe the issue in detail (e.g., malfunction, unusual sounds, performance problems).

- Attachments (if applicable):
Attach images or supporting documents if necessary.

Priority Level

- Low
- Medium
- High
- Urgent

For Internal Use Only

- **Request ID:** _____
- **Date Received:** _____
- **Assigned Technician:** _____
- **Resolution Date:** _____
- **Comments:** _____