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| Section 1: Customer Details |
| Customer: |  | Building: |  |
| Supervisor: |  | Room Number: |  |
| Institute: |  | Email/Tel: |  |
| Grant Number: |  | Date: |  |
| **Section 2: Job Details** |

|  |
| --- |
| Brief description of job request: |
|  |
| Equipment Type: |  | Serial no: |  |
| Make: |  | DBS no: |  |
| Model: |  | Location: |  |
| Item has been decontaminated and Declaration of Contamination Status form signed off: | Signed: |  |
| **Section 3: Workshop Details:** |
| Assigned Tech: |  | Date: |  |
| Initial evaluation and cost estimate:  |
|  |
| Materials & Parts List |
| Qty: | Unit Cost: | Qty Cost: | Supplier: | Stock No: | Part Description: |
|  |  |  |  |  |  |
| Summary of work undertaken & link to Technician’s Report: |
|  |
| Final Checks: |
|  | Assigned Tech: *John Doe* | Reviewing Tech: *Johnny Doe* |
| Electrical Safety including PAT: | ✓ | ✓ |
| Mechanical Safety: | ✓ | ✓ |
| Biological Safety | ✓ | ✓ |

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| --- | --- | --- | --- |
| Tech 1 Name: |  | Tech 1 Hours: |  |
| Tech 2 Name: |  | Tech 2 Hours: |  |
| Tech 3 Name: |  | Tech 2 Hours: |  |
|  |  | Total Tech Hours: |  |
|  |  | Total Hours Charge (£) |  |
|  |  | Total Material Charge(£): |  |
| Est. Cost For External Work: |  | Total Customer Charge: |  |
| Date of Completion: |  | Job Reference No: |