

WORK ORDER

Date: _____ No.: _____
Location: _____

Description:

Purpose: *Give complete explanation here, not by letter. Attach extra sheet if necessary. Sketch must accompany changes in distribution system, buildings, pumping equipment and piping. If contribution or refundable deposit towards the cost is to be obtained, state the amount thereof, from whom it will be received, and if an agreement is to be entered into, submit the signed agreement.*

New _____ Replacement _____ Repairs _____ Main _____ Service _____ Hydrant _____ Ext. _____

Charge The Total Cost Of This Order To:

Account Number: _____
Total Feet: _____
Cost Per Foot: _____
Date Started: _____
Date Complete: _____
Approved By: _____
Approved By: _____
Approved By: _____

Summarized Cost

Stock: _____
Labor: _____
Truck: _____
Compressor: _____
Rental Equipment: _____
Overhead: _____
Other: _____
Total: _____

Type Excavation Encountered:

Type Of Road: _____ Distance From Curb: _____
Depth Of Cover: _____

Remarks:

