

WORK AUTHORIZATION

ROUTINE URGENT EMERGENCY

LINE CODE UNIT COST

REPORT BY (NAME)

DATE REPORTED

YR. MO. DAY

TIME REPORTED

John Ellis

83-02-26

0630

LOCATION

NNSY STANLEY COURT
 NEW GOSPORT ST. JULIENS CRK.

ADDRESS

Qtrs. K-8
5833 Hawthorne Lane

DESCRIPTION OF PROBLEM

leaking radiator, floor tiles loose

WORK PERFORMED BY CONTRACTOR

EXACT DESCRIPTION OF TROUBLE:

broken seal in valve, water loosened tiles

WORK PERFORMED:

replace valve, replace tiles (8), no substructure damage

LIST ONLY ITEMS VALUED ABOVE \$2.00- MATERIAL INSTALLED

GOVERNMENT REPRESENTATIVE COMMENTS

QUANTITY PART DESCRIPTION

WORKER SIGNATURE(S)

Monroe Steinhaker

DATE & TIME WORK STARTED

02-26-83 1000

DATE & TIME WORK COMPLETED

02-26-83 1415

TENANT TO COMPLETE ITEMS BELOW AFTER WORKER COMPLETES ITEMS ABOVE

TENANTS SIGNATURE

John Ellis

DATE (BY TENANT) DAY/MONTH/YEAR

02-26-83 2:30

TENANTS COMMENTS (CHECK ONE)

WORK SATISFACTORY
 WORK NOT SATISFACTORY

CALL HOUSING OFFICE FOR FURTHER COMMENTS

CONTRACT MANAGERS SIGNATURE & DATE

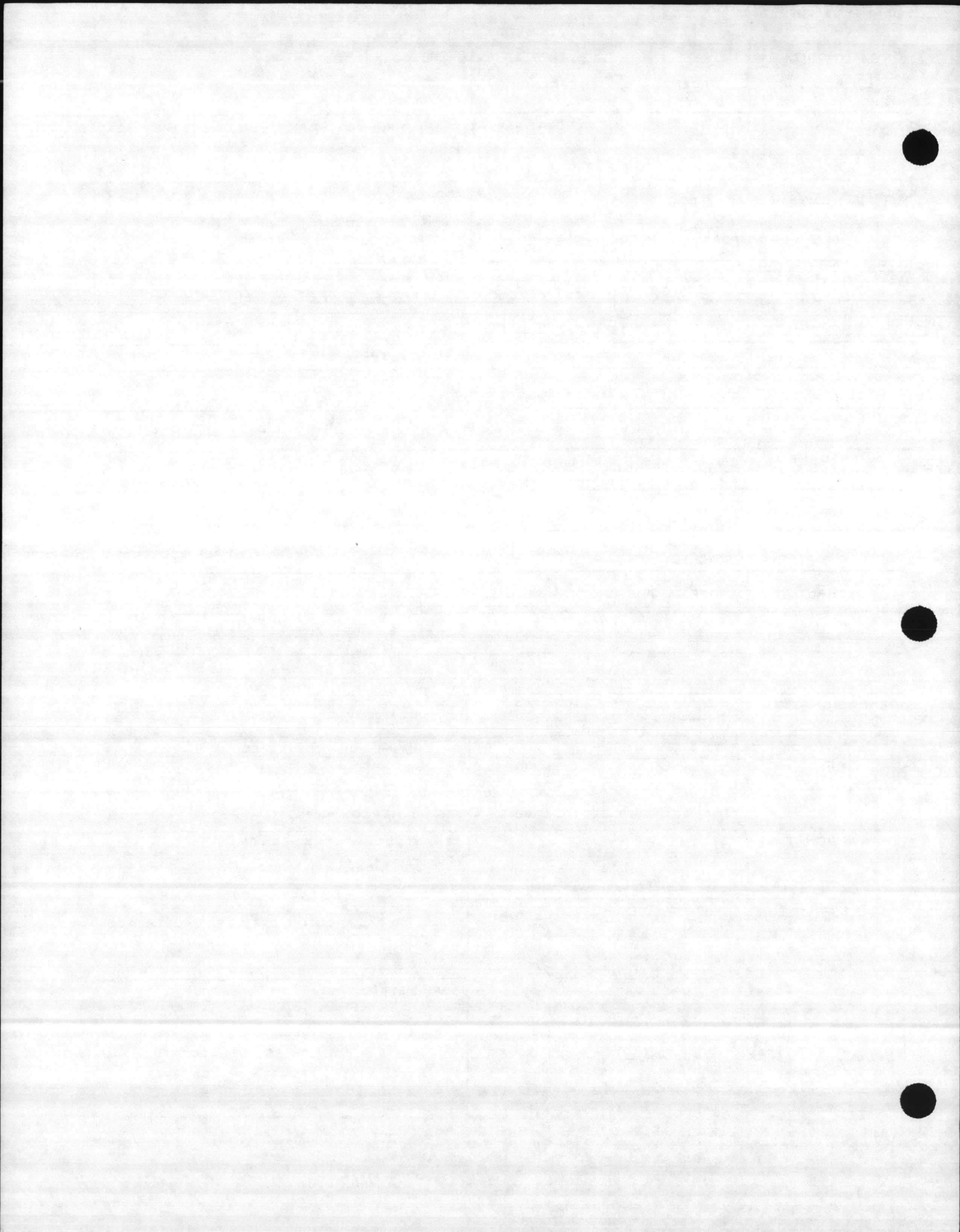
James Neely 2/26/83

COPY DISTRIBUTION:

FIRST - HOUSING
SECOND - CODE 460
THIRD - CODE 495
FOURTH - CONTRACTOR

1 MAR 1983

004 117



HOUSING MAINTENANCE WORK AUTHORIZATION
5ND NNSY 11101/73 (7-80)

WORK AUTHORIZATION <input checked="" type="checkbox"/> ROUTINE <input type="checkbox"/> URGENT <input type="checkbox"/> EMERGENCY	LINE CODE UNIT COST
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REPORT BY (NAME) <i>Geraldine Snyder</i>	DATE REPORTED <i>02-23-83</i>	YR. MO. DAY	TIME REPORTED <i>1436</i>
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LOCATION <input type="checkbox"/> NNSY <input type="checkbox"/> STANLEY COURT <input checked="" type="checkbox"/> NEW GOSPORT <input type="checkbox"/> ST. JULIENS CRK.	ADDRESS <i>Qtr. A-9</i> <i>746.3 Dinwiddie Street</i>
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DESCRIPTION OF PROBLEM
roaches all over the place

WORK PERFORMED BY CONTRACTOR

EXACT DESCRIPTION OF TROUBLE:
roaches in kitchen area, nesting in hot water heater

WORK PERFORMED:
sprayed for roaches

LIST ONLY ITEMS VALUED ABOVE \$2.00 MATERIAL INSTALLED	GOVERNMENT REPRESENTATIVE COMMENTS
QUANTITY PART DESCRIPTION	

WORKER SIGNATURE(S)
Monroe Stalmer

DATE & TIME WORK STARTED <i>1410 02-23-83</i>	DATE & TIME WORK COMPLETED <i>02-23-83 1500</i>
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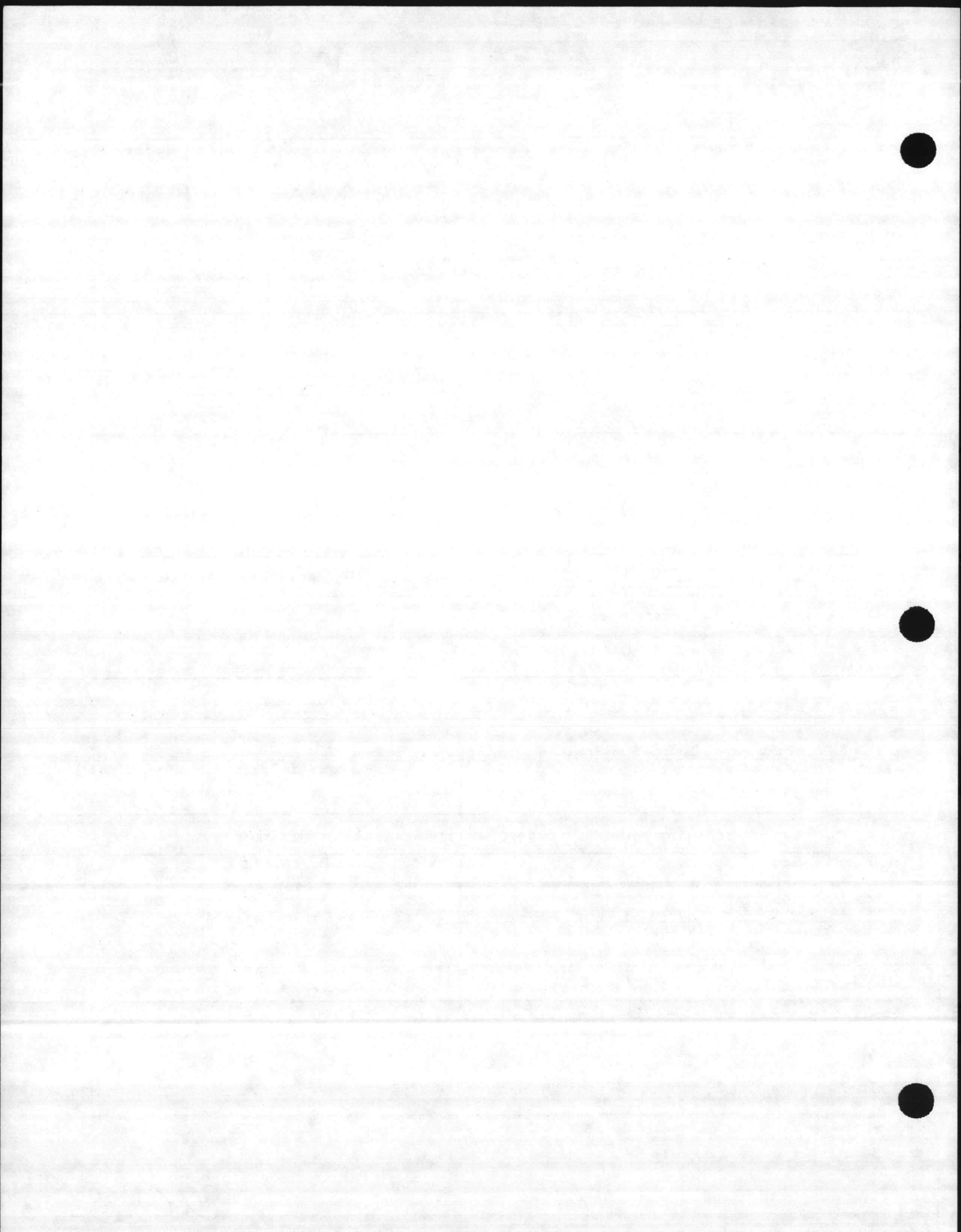
TENANT TO COMPLETE ITEMS BELOW AFTER WORKER COMPLETES ITEMS ABOVE

TENANTS SIGNATURE <i>Geraldine Snyder</i>	TENANTS COMMENTS (CHECK ONE) <input checked="" type="checkbox"/> WORK SATISFACTORY <input type="checkbox"/> WORK NOT SATISFACTORY CALL HOUSING OFFICE FOR FURTHER COMMENTS <i>spray smelled</i>
DATE (BY TENANT) DAY/MONTH/YEAR <i>02-23-83 1500</i>	

CONTRACT MANAGERS SIGNATURE & DATE <i>Jeanne Neely 2/28/83</i>	COPY DISTRIBUTION: FIRST - HOUSING SECOND - CODE 460 THIRD - CODE 495 FOURTH - CONTRACTOR
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MAR 1983

005 118



WORK AUTHORIZATION

ROUTINE URGENT EMERGENCY

LINE CODE UNIT COST

REPORT BY (NAME)

DATE REPORTED

YR. MO. DAY

TIME REPORTED

Margaret Hatcher

83-02-28

0820

LOCATION

NNSY STANLEY COURT
 NEW GOSPORT ST. JULIENS CRK.

ADDRESS

Apts. B-96
312 Adams Street

DESCRIPTION OF PROBLEM

no hot water

WORK PERFORMED BY CONTRACTOR

EXACT DESCRIPTION OF TROUBLE:

element burned out

WORK PERFORMED:

replace heating element

LIST ONLY ITEMS VALUED ABOVE \$2.00-
MATERIAL INSTALLED

GOVERNMENT REPRESENTATIVE COMMENTS

QUANTITY PART DESCRIPTION

1 Helpoint 19FTS95941B

WORKER SIGNATURE(S)

Monroe Stalman

DATE & TIME WORK STARTED

1200

02-28-83

DATE & TIME WORK COMPLETED

1240

02-28-83

TENANT TO COMPLETE ITEMS BELOW AFTER WORKER COMPLETES ITEMS ABOVE

TENANTS SIGNATURE

Margaret Hatcher

DATE (BY TENANT)

DAY/MONTH/YEAR

02-28-83

TENANTS COMMENTS (CHECK ONE)

WORK SATISFACTORY
 WORK NOT SATISFACTORY

CALL HOUSING OFFICE FOR FURTHER COMMENTS

water was greasy

CONTRACT MANAGERS SIGNATURE & DATE

James Neely 2/28/83

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FIRST - HOUSING
SECOND - CODE 460
THIRD - CODE 495
FOURTH - CONTRACTOR

MAR 1983

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HOUSING MAINTENANCE WORK AUTHORIZATION
5ND NNSY 11101/73 (7-80)

WORK AUTHORIZATION <input checked="" type="checkbox"/> ROUTINE <input type="checkbox"/> URGENT <input type="checkbox"/> EMERGENCY	LINE CODE UNIT COST
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PORT BY (NAME) <i>Cmdr. Adams</i>	DATE REPORTED <i>83-02-23</i>	YR. MO. DAY	TIME REPORTED <i>1500</i>
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LOCATION <input type="checkbox"/> NNSY <input type="checkbox"/> STANLEY COURT <input type="checkbox"/> NEW GOSPORT <input checked="" type="checkbox"/> ST. JULIENS CRK.	ADDRESS <i>Qtrs. L-3</i> <i>432 Chambers Court</i>
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DESCRIPTION OF PROBLEM
bathroom tiles loose, 1 missing

WORK PERFORMED BY CONTRACTOR

EXACT DESCRIPTION OF TROUBLE:
3 tiles loose, corner tile missing
no apparent water damage.

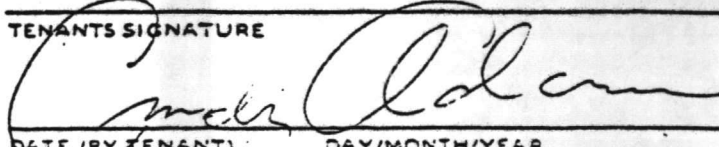
WORK PERFORMED:
tiles replaced

LIST ONLY ITEMS VALUED ABOVE \$2.00- MATERIAL INSTALLED	GOVERNMENT REPRESENTATIVE COMMENTS
QUANTITY PART DESCRIPTION	

WORKER SIGNATURE(S)
Monroe Stelmaker

DATE & TIME WORK STARTED <i>0930 02-25-83</i>	DATE & TIME WORK COMPLETED <i>02-25-83 1100</i>
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TENANT TO COMPLETE ITEMS BELOW AFTER WORKER COMPLETES ITEMS ABOVE

TENANTS SIGNATURE  DATE (BY TENANT) DAY/MONTH/YEAR <i>02-25-83</i>	TENANTS COMMENTS (CHECK ONE) <input checked="" type="checkbox"/> WORKS SATISFACTORY <input type="checkbox"/> WORK NOT SATISFACTORY CALL HOUSING OFFICE FOR FURTHER COMMENTS
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CONTRACT MANAGERS SIGNATURE & DATE <i>Janis Neely 2/25/83</i>	COPY DISTRIBUTION: FIRST - HOUSING SECOND - CODE 460 THIRD - CODE 495 FOURTH - CONTRACTOR
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MAR 1983

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