WORK ORDER

Work order no.: _____ Date: _____ Priority: Low / Normal / Urgent

Customer
Name
Phone / email
Billing address

Job site
Address
Access / contact on site
Scheduled date and time

Work requested

_____
_____
_____

Assigned to: _____ Start: _____ Finish: _____

Labor

Worker / task	Hours	Rate	Amount

Labor total: _____

Parts and materials

Item	Qty	Unit cost	Amount

Parts total: _____

Job total (before tax): _____

Work completed: Yes / No Notes: _____

Customer signature: _____ Date: _____

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