

Customer Request Number

CUSTOMER REQUEST 1. Date: _____

California State University, Fresno

Mail# LS140

Instructions to complete the form is provided below.

2. Description of service request

3. Building Name:

4. Room Number:

5. Department:

6. Requestor:

7. Contact Person:

8. Phone Number/Mail#

9. Work should completed by:

10. Department Approval:

11. Contact Email:

INSTRUCTIONS TO REQUEST SERVICES

1) Complete all parts of the form clearly and completely. Incomplete service requests may delay processing.

2) Submit the service request as soon as possible to ensure ample time for planning, scheduling, and completing your request.

3) If you have questions while completing this form, contact us at (559) 278-7422 and we will be happy to help.

Chargeback: If your request for service may result in a chargeback to the department, you will be notified before the service is completed. An authorization from the department or dean will be required on all chargeback services.