

TENANT SERVICE REQUEST NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF PROPERTY MANAGEMENT & CONSTRUCTION OFFICE OF BUILDING MGT. & OPERATIONS PO BOX 038, TRENTON NJ 08625-0038	1. THIS SECTION TO BE COMPLETED BY REQUESTING AGENCY		
	REQUESTER	RM NO.	TELEPHONE
	AGENCY NAME	DATE	AGENCY TSR #

INSTRUCTIONS: All information in Section 1. is to be completed by the Requesting Agency. *(Please type or print)*
 Submit the completed White and Canary copy to Building Management with any additional required documentation.

Building:	Floor/Rm. No.:	For Additional Information Contact:
Name:	Tel No.:	

JOB DESCRIPTION AND REMARKS *(only one job per request form)*

Agency Approval	Agency Acct. No.
-----------------	------------------

DO NOT WRITE BELOW — FOR BUILDING MANAGEMENT USE ONLY

2. THIS SECTION TO BE COMPLETED BY O.B.M.O.

PRIORITY	STATUS	TOT. EST. HRS.	EST. START DATE	EST. COMPLETION	EST. LABOR COST	EST. MAT. COST	EST. TOT. COST		
					\$	\$	\$		
 TRADES REQUIRED SHOW ESTIMATED HOURS IN BOXES	<input type="checkbox"/>	LAB MECHANIC	<input type="checkbox"/>	FLOOR INSTALLER	<input type="checkbox"/>	PLUMBER	<input type="checkbox"/>	CARPENTER SHOP	M.S.I. NUMBER(S)
	<input type="checkbox"/>	CARPENTER	<input type="checkbox"/>	LABORER	<input type="checkbox"/>	REPAIRER C/S	<input type="checkbox"/>	PAINT SHOP	
	<input type="checkbox"/>	REPAIRER	<input type="checkbox"/>	M.E.S.	<input type="checkbox"/>	SHEET METAL	<input type="checkbox"/>	OTHER	
	<input type="checkbox"/>	ELECT.	<input type="checkbox"/>	MASON	<input type="checkbox"/>	OUTSIDE CONTRACTOR			
CHECK REQUEST	WORK TO BE DONE BY: <input type="checkbox"/> O.B.M.O. STAFF <input type="checkbox"/> UNION TRADES <input type="checkbox"/> OUTSIDE CONTRACTOR								
TYPE OF BILLING	<input type="checkbox"/> NO BILLING <input type="checkbox"/> DEBIT & CREDIT O.B.M.O. SUPERVISOR & DATE: _____ <input type="checkbox"/> MONTHLY <input type="checkbox"/> OTHER: _____								

3. PERMIT REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO	WORK ORDER NUMBER _____
TRADE(S): _____	

DISTRIBUTION WHITE — OFFICE OF BUILDING MGT. & OPERATIONS CANARY — OFFICE OF BLDG. MGMT./RETURN TO AGENCY PINK — RETAINED BY AGENCY	O.B.M.O. TSR NO.	
TSRC		