

# TCC Work Request

Date Requested \_\_\_\_\_ Date Needed \_\_\_\_\_ Requester \_\_\_\_\_  
Contact Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_  
Building \_\_\_\_\_ Room \_\_\_\_\_  
Hours room unlocked & available \_\_\_\_\_  
**Billing Account #** \_\_\_\_\_

Work Description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

System Description: Make \_\_\_\_\_ Model \_\_\_\_\_ Operating System \_\_\_\_\_  
IP Address/Name \_\_\_\_\_

**Please note: There is a one hour minimum for all work requested.**

I certify that I am authorized to place charges against the account number above:  
Print name here: \_\_\_\_\_  
Signed: \_\_\_\_\_ Date \_\_\_\_\_

## Service Provider use only

Assigned to: \_\_\_\_\_ Estimated Completion Date \_\_\_\_\_

Materials Needed:

Qty	Description	Cost	Extended Cost
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Total Materials Cost** \_\_\_\_\_

**Acceptance of Charges Approved and Work Completed** \_\_\_\_\_

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

**X hourly rate: \$50 per hour = \_\_\_\_\_ Total Labor Cost** \_\_\_\_\_

**Total Amount to Bill** \_\_\_\_\_