

U.S. Postal Service

Maintenance Work Order Request

Sub-site	Register Number	Work Order Number	Priority	Work Code	Equipment Acronym	Equipment Number	Eqpt. Class	Issued		
								Date (MM-DD-YYYY)	Crew No.	Est. Time

Work Request (To be completed by the requesting office or organization)

Office Name			City			State		ZIP + 4	
Floor	Area	Room	Person to Contact					Phone (Include area code)	
Requested By (Name and title)			Originating Department			Phone (Include area code)		Date Required	

Description of Work Requested (Equipment name and number if known)

			Approved By (Name, title, and signature)				Date	
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Work Order (To be completed by Maintenance)

Description of Work Performed

Work Completed By		Date	Work Accepted By (Close Work Order)			Date	
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Parts Issue (Use this section to record parts issues when MARS is unavailable for use.)

Part Number	Nomenclature	Quantity	Issued By	Issued To

Official Disposition (Use this section to verify work completion and closing of the Maintenance Work Order.)

Maintenance Official Approval (Signature and title)			Date	Close Work Order (Maint. Ops. Support initials)	
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Equipment Breakdown Work Order

Sub-site	Register Number	Work Order Number	Priority	Work Code	Equipment Acronym	Equipment Number	Eqpt. Class	Issued		
								Date (MM-DD-YYYY)	Crew No.	Est. Time

- Instructions**
- Use this report to record information about *all* automation or mechanization equipment breakdowns that last 18 minutes or more.
 - Provide the work order number generated by MARS associated with the breakdown.
 - Provide detailed information about the problem and the diagnostic action taken. Attach additional pages if necessary to give a complete picture of the downtime events.
 - This report should be passed on to each tour until the equipment has been repaired.
 - This report should be reviewed and signed by both Maintenance and Operations personnel.
 - After the repairs are completed and signed off on this report, forward the report to the Maintenance Operation Support unit.

Work Request (To be completed by the requesting office or organization)										
Office Name					City			State		ZIP + 4
Floor		Area		Room	Person to Contact				Phone (Include area code)	
Requested By (Name and title)					Originating Department			Phone (Include area code)		Date Required
Event		Time		Date		Equipment Downtime			Breakdown Codes	
Breakdown Occurred		▪ AM ▪ PM				Due to Maintenance		▪	Downtime Cause Code	
Maintenance Notified		▪ AM ▪ PM				Parts Unavailable		▪		
Returned to Operation Status		▪ AM ▪ PM				Other		▪		
Mail Processing Time Lost				Time (Amount)		Maintenance (Signature)			Operations (Signature)	
				▪						

Work Order (To be completed by Maintenance)

Description of Work Performed

					Work Completed By			Date	
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Parts Issue (Use this section to record parts issues when MARS is unavailable for use.)

Part Number	Nomenclature	Quantity	Issued By	Issued To

Official Disposition (Use this section to verify work completion and closing of the Equipment Breakdown Work Order.)

Maintenance Official Approval (Signature and title)					Date			Close Work Order (Maint. Ops. Support initials)	
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