

LEVY COUNTY IT
REQUEST FORM

(Please return form to the County Commissioners Office – Fax 486-5167 OR email:
levybocc@levycounty.org)
ATTN: Wilbur Dean

Date: _____

Office: _____ Location of equipment: _____
(Bldg/Room/Name)

Requested by: _____

Type of equipment: _____ Model: _____

Asset #: _____ Serial #: _____

Brief Description of work request:

.....
(To be completed by IT Personnel)

Start repair: _____ AM/PM Completed: _____ AM/PM

Follow up Repairs Needed? Yes No

Date Received: _____ Date Checked: _____

Action Taken:

Signature: _____ Date: _____