

ORBITAL WELDING MACHINE REQUEST FORM

FEE SCHEDULE - \$62.50/HOUR + MATERIALS

***FILL OUT THE INFORMATION REQUESTED &
PROVIDE A VALID CHARTFIELD
BEFORE
ANY WORK WILL BEGIN***

TO BE FILLED IN BY USER:

DATE: _____ CHARTFIELD #: _____

USER'S NAME/ADVISOR: _____

DEPARTMENT & ADDRESS: _____

EMAIL: _____ PHONE #: _____

REASON FOR WELDING: _____

USER SIGNATURE: _____

WELDING OPERATOR USE ONLY:

CHUCK ROWLAND _____

TOTAL LABOR HOURS: _____

MATERIALS: _____

TOTAL MATERIALS: _____

WELDING COMPLETED DATE: _____

OPERATOR SIGNATURE: _____

ACCOUNTING USE ONLY:

Invoice #: _____ Amt Due: _____

Voucher #: _____ Date: _____