

MISCELLANEOUS SHIELDING
SERVICE REQUEST ORDER (SSRO)

Tecknit Shielding Services, Inc.

(This form is governed by the terms and conditions of ANL Blanket Purchase Agreement 2K-30001, Req#F2-047040)

Requestor: _____ Date: _____

Job Description: _____

Date Required: _____ Estimate (Not to Exceed Value): \$ _____

Cost Code: _____ Requester Budget Approval: _____

Floor Coordinator: _____ Date: _____

TO BE COMPLETED BY PATTI PEDERGNANA, (TECH. REP.) AND TECKNIT REPRESENTATIVE:

APS Budget Confirmation: _____ Date: _____

Service Request Order Number: _____ Date: _____

APS Technical Representative: _____ Date: _____
(Wendy VanWingeren or Patti Pedernana)

Tecknit Representative: _____ Date: _____

TO BE COMPLETED BY TECKNIT AFTER WORK IS COMPLETED AND GIVEN TO PATTI PEDERGNANA (TECH. REP.) TO DISTRIBUTE AND FILE

Trade: Millwright Electrician Other: _____

Laborer: Journeyman Foreman

Number of Hours Worked: _____ Date Completed: _____

Total Cost: _____ BPA Call #: _____

Tecknit Representative: _____ TSS Job#: _____

Floor Coordinator: _____ Date: _____

APS Technical Representative: _____ Date: _____
(Wendy VanWingeren or Patti Pedernana)