

Plumbing Repair Service Work Order

Work Order #

Date

Status

Customer Information

Name

Address

Phone

Email

Service Location (if different)

Service Details

Description of Problem / Request

Assigned Technician

Start Date & Time

Completion Date & Time

Materials / Parts Used

Item/Part	Qty	Unit Cost	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Labor

Description	Hours	Rate	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Totals

Parts Total

Labor Total

Other Charges

Grand Total

Approval & Signatures

Customer Signature

Name & Date

Technician Signature

Name & Date

Notes / Recommendations

