



WKU ACCESS CONTROL MAINTENANCE REQUEST
INTER-ACCOUNT BILL

BUSINESS OFFICE USE ONLY

Fiscal Year: \_\_\_\_\_

MR-

Date: \_\_\_\_\_

Department: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Estimate: Yes [ ] No [ ]

Email: \_\_\_\_\_

Banner Acct.: \_\_\_\_\_

Building: \_\_\_\_\_

Room #: \_\_\_\_\_

WKU Access Control Use Only

ESTIMATE SECTION

Estimate Date: \_\_\_\_\_

Estimator: \_\_\_\_\_

Labor: \_\_\_\_\_

Materials: \_\_\_\_\_

Contract/Other: \_\_\_\_\_

TOTAL ESTIMATE: \$

Estimates are valid for ninety days

DO NOT WRITE IN THIS SPACE

[ ] Detailed Cost Summary Attached

TOTAL CHARGES: \$

I hereby certify that the materials and/or services listed above were furnished to the department as specified and that the prices charged are proper.

X \_\_\_\_\_ Access Control Administrator or Authorized Agent

X \_\_\_\_\_ Additional Authorizing Signature†

Description of Work Requested:

ACCEPTANCE OF ESTIMATE and AUTHORIZATION TO PROCEED: I hereby authorize WKU Access Control to proceed with the work described above and on any attached pages. I agree to pay any and all charges associated with this Maintenance Request. I understand the above account number will be charged for all labor, materials and other costs associated with the requested work upon completion of work or delivery of services in accordance with established University procedures.

X \_\_\_\_\_ Department Head or Authorized Agent (If chargeable) Date

†The following types of requests require a signature by the Vice President for Finance and Administration and a stated source of funding: (1) Design and space planning; (2) Renovation: Any item that would alter the physical structure or use of a facility or exterior environment including code review; (3) New Facilities: Additions to existing or separately standing construction; (4) special events requiring University sponsorship or allocation of funds.