

Repair Work Order

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WORK ORDER #

DATE

EQUIPMENT / ASSET AFFECTED

LOCATION

REPORTED ISSUE / SYMPTOM

DOWNTIME START TIME

DOWNTIME END TIME

TOTAL DOWNTIME

DIAGNOSIS / ROOT CAUSE

REPAIR ACTIONS TAKEN

PARTS REPLACED

PART #	DESCRIPTION	COST

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LABOR HOURS

TESTED / VERIFIED ☐ Yes ☐ No

TECHNICIAN SIGNATURE / DATE	SUPERVISOR SIGNATURE / DATE
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