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| **Maintenance Section** |
| Serial No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Receiving Date: \_\_\_\_\_\_\_\_\_\_\_\_ |
| Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Initiation Date: |  |  | Time: |  |  | Department: |  |

Problem: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Initiation by: |  |  | Approved by HOD/Supervisor: |  |

Problem Solved: Yes No

Remarks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| *To be filled after completion of Work Order* | |
| Signature of Initiator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Closing Time/Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |