

SERVICE DELIVERY ORDER (SDO) / SERVICE REPORT

| | | | | | |
|-----------------|---|--|----------------|---|--|
| Project Site | : | | Date | : | |
| DO No. | : | | Check In-Time | : | |
| Technician | : | | Check Out-Time | : | |
| Task Objectives | : | | | | |
| System Type | : | <input type="checkbox"/> CCTV <input type="checkbox"/> Door Access <input type="checkbox"/> Lift Access <input type="checkbox"/> Barrier Gate <input type="checkbox"/> Intercom <input type="checkbox"/> Networking <input type="checkbox"/> Others: _____ | | | |

Work Description

Scope 1 Location :
Status :

Scope 2 Location :
Status :

Scope 3 Location :
Status :

Scope 4 Location :
Status :

Scope 5 Location :
Status :

Scope 6 Location :
Status :

Materials Delivered to Site

Representative Information

Reported by,

Client's Signature

Special Instruction / Note

| | |
|-------------|----------------------|
| (Signature) | (Client's Signature) |
| Name : | Name : |
| Date : | Position : |

Validated by RS Techwin Sdn Bhd