

**Fairfield County Maintenance  
Vehicle Work Order**

Dept. \_\_\_\_\_

Driver: \_\_\_\_\_ Phone # \_\_\_\_\_

Last 8 Digits of Vin # \_\_\_\_\_ Vehicle # \_\_\_\_\_

Tag # \_\_\_\_\_ Make of Vehicle \_\_\_\_\_

Mileage / Hour Reading \_\_\_\_\_ Year of Vehicle \_\_\_\_\_

Type of Equipment \_\_\_\_\_

Description of Problem:

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Sent to shop Date: \_\_\_\_\_ Time: \_\_\_\_\_

Leaving the shop Date: \_\_\_\_\_ Time: \_\_\_\_\_

Mechanic: \_\_\_\_\_

Remarks:

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# Part's Order Form

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

Vin: # \_\_\_\_\_

Engine # \_\_\_\_\_

Make # \_\_\_\_\_

2 Wheel Drive or 4 Wheel Drive (circle one)

## Parts to order

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

5) \_\_\_\_\_

6) \_\_\_\_\_

7) \_\_\_\_\_

8) \_\_\_\_\_

9) \_\_\_\_\_

10) \_\_\_\_\_

11) \_\_\_\_\_

12) \_\_\_\_\_

Mechanic: \_\_\_\_\_