INTERNAL DOCUMENT

WORK CAMP/CREW EQUIPMENT: INVENTORY REPAIR OR REPLACE

TO BE COMPLETED BY WORK CREW/WORK CAMP LEADER:

 Date:

 Camp/Crew Site:

Please provide the following information:

Name of Equipment	Brand	Model Number	Repair or Replace Recommendation	Estimated Cost

Description of Issue:

Are you requesting to borrow equipment from another Work Camp site? YES NO

TO BE COMPLETED BY CORRECTIONS FIELD MANAGER/WORK CREW FOREMAN SUPERVISOR:

 REPLACE
 REPAIR

 Third Party Maintenance/Repair Contract:
 YES
 NO

 VCI Small Engine Shop Repair:
 YES
 NO

 Approved By:

 Date:

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Dated: 5/4/2017

THIS IS AN INTERNAL DEPARTMENT OF CORRECTION'S GUIDANCE DOCUMENT TO ASSIST IN UNDERSTANDING THE REQUIREMENTS OF THE DEPARTMENT'S DIRECTIVE 201. IT SHOULD NOT BE CONSTRUED TO BE THE DEPARTMENT'S POLICY BUT RATHER A WORK PRODUCT.