TOLIKAN CHAPTER
MANPOWER ASSISTANCE REQUEST FORM

Name of Requestor: __________________________________________ Date: ________________

Cellular/Home Phone: (____) ______-________ Message Phone: (____) ______-________

Physical Location: (Draw map in the back)

________________________________________________________________________

Type of work to be done:

○ Home Construction: Size of House: ________________
○ Home Repair
○ Home Renovation
○ Wood Chopping (Only for Elderly and Handicap)
○ Other: ________________________________________________

Description of work to be done:

________________________________________________________________________

Materials Available:

○ Nails/Screws
○ Sheetrock
○ Roofing Paper/Panel
○ Cement
○ Boards: 2x4, 6, 8, and 16
○ Plywood Boards
○ Wafer Boards
○ Paint
○ Sand/Gravel
○ Roofing Cement
○ Post for Ramps
○ Joint Compound
○ Taping Paper
○ Tiles/Flooring
○ Plumbing Pipes

Materials still needed: ________________________________________________

Will have those by: ________________________________________________

Arc Tools available for workers: YES / NO

Signature of Requestor: ____________________________ Date: ________________

NOTE: Homeowner must be present when work is being done on property.

ADMINISTRATION USE ONLY!

APPROVAL/ DISAPPROVAL by: ____________________________ Date: ________________

Date Start: ________________ By: ____________________________ Date Completed: _______

Comments:

________________________________________________________________________

________________________________________________________________________

*SAFETY REGULATIONS & PUBLIC EMPLOYMENT POLICY PROCEDURES REQUIRED FOR ALL PROJECTS*