

**LEISURE VILLAGE ASSOCIATION, INC.  
WORK ORDER**

**Occupant Name** \_\_\_\_\_ **Address** \_\_\_\_\_ **Phone No.** \_\_\_\_\_

**Description of Work:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

1. Occupant agrees to pay (by check to L.V.A. only) and serviceman must receive payment at time of work completion. If home is rented, occupant agrees that they have received authorization from owner to have work done, and owner may be billed.

**THIS FORM MUST BE SIGNED BY OCCUPANT AGREEING TO ABOVE STATED TERMS, PRIOR TO ANY WORK COMMENCING.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**W.O. #** \_\_\_\_\_

**Appt. Date** \_\_\_\_\_ **Appt. Time** \_\_\_\_\_ **Serviceman** \_\_\_\_\_

**Start Time** \_\_\_\_\_ **Total Time** \_\_\_\_\_

**Work Performed/Comments:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Parts #	Discrip.	Quantity	Price	Total
		TOTAL	PARTS	

LABOR: \_\_\_\_\_ HRS \_\_\_\_\_  
 TOTAL LABOR: \_\_\_\_\_  
 TOTAL PARTS: \_\_\_\_\_  
 TAX ON PARTS: \_\_\_\_\_  
 TOTAL: \_\_\_\_\_  
 LESS DEPOSIT: \_\_\_\_\_  
 TOTAL DUE: \_\_\_\_\_  
 CHECK #: \_\_\_\_\_  
 DATE: \_\_\_\_\_