

## **Request for Equipment and Services**

Prior to completing this form, the event must be approved by the appropriate UF office. The Office of Student Activities and Involvement only permits and approves registered student organizations while the Office of the Vice President for Business Affairs permits and approves all other persons/groups for campus events. Please contact the appropriate office for event policies and procedures before continuing with Work Management support.

Please fill out this form and send it to <a href="workorder@admin.ufl.edu">workorder@admin.ufl.edu</a>. The deadline to submit the form is two weeks in advance of the event. If applicable, you will receive an estimate for all requested items. The estimate must be accepted and approved before the Work Order is issued. It is the customer's responsibility to contact Work Management and accept the estimate and provide funding information. Work will be scheduled on a first come first serve basis once the estimate is approved and funding is established.

Please contact us as early as possible prior to the event to ensure that we can assist you. Many campus events are scheduled around the same time. We will attempt to process forms after the deadline, but are unable to guarantee that we can provide the requested equipment and services.

For more information, see www.facilitiesservices.ufl.edu/get-help/event-services/

| <b>Event Information</b>               |                             |                                   |                            |          |
|--|-----------------------------|-----------------------------------|----------------------------|----------|
| Event name                             |                             |                                   | Date of event              |          |
|  |                             |                                   | Time of event              |          |
| Event description                      |                             |                                   | Expected # of participants |          |
| Will food/beverages be served?         |                             | Name of food/beverage vendor(s):  |                            |          |
| No                                     | Yes                         |                                   |                            |          |
| Will there be vendors other than food? |                             | Names of other vendors            | :                          |          |
| No                                     | Yes                         |                                   |                            |          |
| Will participants be                   | able to bring food/bevera   | ages from outside the event?      |                            |          |
| No                                     | Yes                         |                                   |                            |          |
| Is this a first time event?            |                             | Month/year of last even           | nt:                        |          |
| No                                     | Yes                         |                                   |                            |          |
| Are you seeking "G                     | reen event certification" f | rom the Office of Sustainability? | No                         | ○ Yes    |
| http://sustainable.u                   | ufl.edu/news-events/susta   | inable-event-certification-guide/ | 9                          | <b>-</b> |

| Please check all event equipment and services that you are requesting: |             |   |  |  |  |
|--|-------------|---|--|--|--|
| <b>Equipment Rental</b>  | Estimated # | Contracted Services   |  |  |  |
| Tables   |             | Delivery and pick up of equipment                                     |  |  |  |
| Chairs   |             | Indoor site clean-up ( <i>Custodial Only</i> )                        |  |  |  |
| Recycling containers   |             | Outdoor site clean-up (Grounds Only)                                  |  |  |  |
| Food waste/compostable contain   | ners        | Electricity to site (if available)                                    |  |  |  |
| Trash containers   |             | Running water to site (if available)                                  |  |  |  |
| Barricades   |             | Utility line tracing* (required for staked tents, sign posts or       |  |  |  |
| Decorative palm plants   | ······      | any other ground disturbance)   |  |  |  |
| Poster Boards*   |             | *Must complete www.sunshine811.com/safe-digging-process               |  |  |  |
| *Must reserve posters prior to submittal via                           |             | and www.facilitiesservices.ufl.edu/departments/utilities/dig-permits/ |  |  |  |
| Bill Peel at wpeel@ufl.edu or 352-273                                  | 3-5066      |   |  |  |  |

| E   |                       |                        |  |  |  |  |
|---|-----------------------|------------------------|--|--|--|--|
| Event Site Information  |                       |                        | Ruilding and Poom Number:                          |  |  |  |
| Location of Event:  | Inside                | Outside                | Building and Room Number:                          |  |  |  |
|   |                       |                        |  |  |  |  |
| <b>Please add any additional information about the event here</b> (e.g., what time equipment should be delivered and picked up, special instructions) |                       |                        |  |  |  |  |
|   |                       |                        |  |  |  |  |
|   |                       |                        |  |  |  |  |
|   |                       |                        |  |  |  |  |
|   |                       |                        |  |  |  |  |
| Method of Payment   |                       |                        |  |  |  |  |
|   | vices require         | a means of pavi        | ng for services, or for borrowed equipment that is |  |  |  |
| damaged or lost.  |                       |                        | .g,  |  |  |  |
| Department PO number (e.g. 17PPD12345)  |                       |                        |  |  |  |  |
|   |                       |                        |  |  |  |  |
| External Customer UFL r   | <b>number</b> (e.g. U | JFL123-001)            |  |  |  |  |
|   |                       |                        |  |  |  |  |
|   |                       |                        |  |  |  |  |
| Contact Information   |                       |                        |  |  |  |  |
| Requester Information   |                       |                        |  |  |  |  |
| Requester:  |                       |                        | Title:   |  |  |  |
| Department:   |                       |                        |  |  |  |  |
| Department ID:  |                       |                        |  |  |  |  |
| Phone:  |                       |                        | Cell:  |  |  |  |
| Email:  |                       |                        |  |  |  |  |
| Check here if the requester is the campus sponsor contact. You will not have to fill out the Sponsor Information.                                     |                       |                        |  |  |  |  |
| Sponsor Information   |                       |                        |  |  |  |  |
| Campus Sponsor:   |                       |                        | Sponsor's Title:                                   |  |  |  |
| Sponsor's Department  | •                     |                        |  |  |  |  |
| Department ID:  | -                     |                        |  |  |  |  |
| 6 1 51  |                       |                        | Sponsor's Cell:                                    |  |  |  |
| Sponsor's Email:  |                       |                        |  |  |  |  |
| ·   |                       |                        |  |  |  |  |
|   |                       |                        |  |  |  |  |
| Day of Event Coordinate   | or/Contact Inf        | <b>ormation</b> (Requi | red)   |  |  |  |
| Name:   |                       |                        |  |  |  |  |
| Cell Phone:   |                       |                        |  |  |  |  |
| Email:  |                       |                        |  |  |  |  |

Please email this completed form to:

workorder@admin.ufl.edu