

SHIRE OF COLLIE
BUILDING
MAINTENANCE REQUEST AND CHECKLIST



1. BUILDING: _____

2. OFFICER REPORTING: _____ SIGNED: _____

3. DATE: _____

4. MAINTENANCE REQUEST DETAILS

5. MAINTENANCE REQUIRED RESULTS IN;

5.1 Defect Impact

- A1 – Building does not meeting service delivery fully
- B1 – Building only just meeting service delivery
- C1 – Building meets service delivery but could be improved
- D1 – Building does not meet service delivery needs
- E1 – Not applicable

5.2 Impact of not undertaking requested works

- IR – Damage to our image and reputation will result
- CD – May cause further consequential damage to other elements of the building
- CU – Continues use impact; that is the element reported does not properly function
- HS – Health & Safety risk; to our staff, visitors and other users

5.3 Severity: The severity of the negative consequence will have differing impacts on the building occupier or building user;

Negative Consequence	Effect	Severity Scale	Description	Tick as applicable
Health & Safety	People	Low	Incident –minor injury	<input type="checkbox"/>
		Medium	Injury	<input type="checkbox"/>
		High	Major Injury o death	<input type="checkbox"/>
Continuous Use	Building Use	Low	Little inconvenience	<input type="checkbox"/>
		Medium	Restricted use of facility	<input type="checkbox"/>
		High	Unable to use facility	<input type="checkbox"/>
Consequential Damage	Building	Low	Single component	<input type="checkbox"/>
		Medium	Multiple components	<input type="checkbox"/>
		High	Catastrophe or replacement	<input type="checkbox"/>
Image & Reputation	People	Low	Occupants	<input type="checkbox"/>
		Medium	Clients or parents	<input type="checkbox"/>
		High	Media / politicians	<input type="checkbox"/>

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Staff Use:

- Maintenance Request logged into Customer Service Software
- Maintenance Request investigated

Date of Inspection _____ . Signed _____

Priority & Rating Scale:

Priority	Definition	
0	Immediate (urgent)	<input type="checkbox"/>
1	Short term (12 month window)	<input type="checkbox"/>
2	Medium Term (24 month window)	<input type="checkbox"/>
3	Long Term (>24 month window)	<input type="checkbox"/>

Priority	Definition	
1	OH&S or statutory requirement	<input type="checkbox"/>
2	Safety or Environmental requirement	<input type="checkbox"/>
3	Structural Damage	<input type="checkbox"/>
4	Functional Loss of Facility	<input type="checkbox"/>
5	Aesthetic Requirement	<input type="checkbox"/>

		1	2	3	4	5
		OH&S Statutory	Safe Environment	Structural Damage	Functional Loss of Facility	Aesthetic Requirement
0	Immediate (urgent)	0	0	0	0	0
		1	2	3	4	5
1	Short term (12 months)	1	1	1	1	1
		1	2	3	4	5
2	Medium term 24 months	2	2	2	2	2
		1	2	3	4	5
3	Longer term >24 months	3	3	3	3	3
		1	2	3	4	5

- Remedial Works Undertaken as requested
- Works not to be undertaken, complainant advised

Date of notification _____ . Signed _____