

PLEASE TYPE OR USE BALL POINT PEN



UNION CARBIDE CORPORATION
TARRYTOWN TECHNICAL CENTER
SAW MILL RIVER RD., RTE. 100C
TARRYTOWN, N. Y. 10591



BUILDING SERVICE WORK ORDER

WORK ORDER NO.
341805

TO: <u>Fred Held</u> NAME OF DEPT. OR SERVICE SHOP	CHARGE TO <u>000824</u> DIV	ACCOUNT UNIT <u>0232530</u> LOCATION DEPT OR PROJECT NUMBER
--	---	---

DESCRIPTION OF WORK TO BE PERFORMED (PLEASE LIST REQUIREMENTS IN DETAIL)

Please determine the extent of the asbestos contamination in LAB 77L, and take appropriate action for either removal or encapsulation.

I believe an outside contractor with experience and licensed for this type of work be use.

Before anything is done please contact Tom Reynolds X2238, A.J. Hinchey X 3989 and W.P. Fethke X 2049

SAFETY WORK ORDER

PRIORITY A TODAY ☐
B 1 WEEK ☒
C 1 MONTH ☐

REQUESTED BY		DATE	2238	ASAP
SIGNATURE <u>Tom Reynolds</u>	6/2/86	2238	DATE PROMISED	
LOCATION WHERE WORK IS TO BE PERFORMED			BUILDING	ROOM NO.
			LINDE	77L
			PHONE NO.	2238

FOR SHOP SUPERVISOR'S USE

DEPARTMENT	DATE COMPLETED	WORK DONE BY
TOTAL HOURS WORKED	MATERIAL COST	SUPERVISOR'S APPROVAL

FOR REALTY DIVISION ACCOUNTING DEPT. USE

COST TO DEPARTMENT REQUESTING SERVICE	BUILDING SERVICE COST
Mrs. @ _____ Per Hour	Basic Hourly Rate _____ Mrs. @ _____ = _____
Mrs. @ _____ Per Hour	Direct Labor Overhead @ _____ = _____
COST OF MATERIALS _____	General Overhead _____ Mrs. @ _____ = _____
TOTAL AMOUNT CHARGED _____	COST OF LABOR (Incl. Overhead) _____
	COST OF MATERIALS _____
	TOTAL BUILDING SERVICE COST _____

A04343