YOUR HVAC COMPANY

Address | Phone | Email | License

HVAC WORK ORDER

WORK ORDER #	STATUS

JOB AND APPOINTMENT

APPOINTMENT DATE	ARRIVAL / COMPLETION	ASSIGNED TECHNICIAN	PRIORITY

CUSTOMER AND SERVICE LOCATION

CUSTOMER / BUSINESS	PHONE	EMAIL

SERVICE ADDRESS

EQUIPMENT

EQUIPMENT TYPE	LOCATION	MANUFACTURER	FILTER SIZE

MODEL NUMBER	SERIAL NUMBER

CUSTOMER-REPORTED ISSUE

SYMPTOMS, TIMING, OPERATING CONDITIONS, AND CUSTOMER PRIORITIES

DIAGNOSTIC FINDINGS

INSPECTION RESULTS, READINGS, FAILED COMPONENTS, AND LIKELY CAUSE

RECOMMENDATION AND AUTHORIZATION

RECOMMENDED WORK / OPTIONS DISCUSSED

AUTHORIZED BY	AUTHORIZATION METHOD	DATE / TIME

HVAC WORK ORDER

WORK ORDER # _____

WORK PERFORMED

REPAIR, SERVICE, ADJUSTMENTS, READINGS, AND VERIFICATION COMPLETED

PARTS, MATERIALS, AND CHARGES

DESCRIPTION	QTY	RATE	AMOUNT

SUBTOTAL	AMOUNT
TAX	AMOUNT
TOTAL	**$**

RECOMMENDATIONS AND CLOSEOUT

FOLLOW-UP, PARTS TO ORDER, OR CUSTOMER INSTRUCTIONS

SYSTEM STATUS AT DEPARTURE

PAYMENT STATUS

ACKNOWLEDGMENT

TECHNICIAN NAME / SIGNATURE

CUSTOMER NAME / SIGNATURE

Customer acknowledgment: I acknowledge the work and system status documented above.

Adapt authorization, payment, warranty, signature, and retention requirements to company policy and applicable law.