



Service Work Order

Phone 303.296.3328

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M.R Solutions Inc.

E-mail

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service@mrsolutionscolorado.com

Denver, Colorado. 80216

Customer Information

Name: _____ Phone: _____ E-Mail: _____

Company: _____ Address: _____

Requested Work: _____

Authorization for Alarm/Camera Security Interruption

__ The undersigned authorizes the M.R Solutions representative to interrupt security by disconnecting the alarm and or video system in the performance of their assigned work and will assume the responsibility for notification of the authorities during this period of interruption.

Estimated period of interruption: _____

Authorization for Forcible Entry

__ The undersigned affirms that they are legally authorized to request the opening of such equipment by M.R. Solutions, Inc. and agrees to hold harmless and indemnify M.R. Solutions, Inc. and its employees against all costs, expenses, losses, damages, actions or causes of actions which may result from or arise out of the services to be performed hereunder.

Signature	Title	Box Number	Date
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Description of work:

Parts used: _____

Travel Time _____ Miles _____ Arrive Time _____ Completion Time _____ Billed Time _____

Customer Signature: _____ Technician Signature: _____

Completion Date: _____

