verizon

Upkeep Memorandum
Distribution Service

3722-19
3-94

	Wire Center	Telephone No.	Serial Number
Work Address		Type Plant ☐ Aerial ☐ Underground ☐ Buried	
Person Reporting	Address		

Work Required:

Field Supervisor's Survey:

Inspected By	Date	Est. Work Hrs.	Act. Work Hrs.

Material Required

SURVEYED FOR SAFETY ☐ Yes ☐ No

Safety Considerations:		Work Priority	
1		1	
2		2	
3		3	

For Completion Refer To:

☐ Repair Work Group ☐ Construction ☐ Other - Specify
☐ Installation ☐ Engineering

Completion Date		Forward Completed Form To:	
Scheduled	Actual	Maintenance Center	
Completed By		Address - No./St.	Rm. No./Flr.
Work Order/Estimate Number		City	State

White - Field Copy Canary - Other Dept. Copy Pink - Mtce. Center Copy