Shire of Pingelly
Customer Service Request

DATE: _____ **URGENT** ☐ **YES** **NO** ☐

NAME: _____

PHONE: _____ **MOBILE:** _____

POSTAL ADDRESS: _____

REQUEST LOCATION: _____

ROADS							
Broken Glass		Graffiti		Line Marking		Shoulders	
Cats Eyes		Gravel Required		Maintenance		Spill	
Crack Seal		Guide Posts		Patching / Pothole		Sweeping	
Grading		Kerb		Reseal		Tree Roots	
ROAD VERGE							
Broken Glass		Hedging		Reticulation		Tree Removal	
Debris		Mulching		Rubbish		Tree Replacement	
Graffiti		Planting		Slashing		Tree Pruning / Fallen	
Guideposts		Pruning		Spraying		Weeding	
DRAINS							
Blocked		Flooded		Need Installing		Slashing	
Broken Pipe		Upgrade		Needs Headwalls		Spraying	
Broken Headwall		Need Cleaning Out		Rubbish		Sinking	
FOOTPATHS							
Broken		Graffiti		Rubbish		Sweeping	
Foreign Material		Install		Shrubs / Trees Prune		Trip Hazard	
Fractured		Reinstate		Smashed Glass		Uneven	
SIGNS							
Damaged		Incorrect / Update		New / Needed		Replace	
Faded		Install		Relocate		Rural Address	
Graffiti		Missing		Remove		Other	
WASTE							
Additional Bin		Bin Maintenance		Bin Vandalised		Litter Pickup	
Bin Delivery		Bin Missing		Car Dumped		Other	
Bin Install		Bin Removal		Landfill			
PARKS							
Barbeques		Gates		Rotunda		Toilet	
Benches		Graffiti		Rubbish		Tree / Plant Removal	
Bins		Hedging		Sand / Debris		Tree / Plant Replacement	
Bollards		Mowing		Shade Structure / Sail		Tree Tying	
Car Park		Needles		Signs		Vandalism	
Edging		Play Equipment		Soft Fall		Verge	
Fertilizing		Pruning		Slashing		Weeding	
Furniture		Reticulation		Spraying		Other	
SHIRE BUILDINGS							
Air Con Maintenance		Door		Insect Spraying		Plumbing	
Cleaning		Electrical		Repairs		Vandalism	
Ceiling		Furniture		Roof		Vermin	
Carpet Cleaning		Graffiti		Toilet		Walls	
Debris		Gutters		Painting		Windows	

EXTRA DETAILS: _____

DIAGRAM OF REQUEST:

OFFICE USE ONLY

REQUEST RECEIVED BY _____ **DATE RECEIVED** _____

Name

LOCATION THE REQUEST WAS SUBMITTED

Depot ☐ Email ☐ Front Counter ☐ Phone ☐

REQUEST SUBMITTED BY

Councillor ☐ Local Business ☐ Resident ☐ Staff ☐

DEPARTMENT TO ACTION

Engineering ☐ Parks & Gardens ☐ Mechanic ☐ Building Maintenance ☐

Completed By _____ **Date Completed** _____

Name

Description of Action Taken _____

Staff Signature: _____ **DATE:** _____

Supervisor Signature _____ **DATE:** _____