

UNITARIAN UNIVERSALIST CONGREGATION OF SALEM (UUCS)
5090 Center Street NE
Salem, Oregon
Facilities Task/Work Order Form
PROCEDURES

UUCS facilities and equipment maintenance, repair and potential replacement are budgeted for in both the pledge budget and in special funds accounts (non-pledge funds), within limitations. Respective Team or Committee Leads (Facilities, Kitchen, Landscape, Music...) are authorized to allocate expense of those funds. The UUCS Board recognizes Authorized Team or Committee Leads for each fiscal year (July – June) for which budget(s) are established. Expenses may not be authorized for work not in the pledge budget or in excess of the budgeted amount approved by the Congregation for that fiscal year. Where pledge funds are neither sufficient or available, special funds may be expended by the authorized Team or Committee lead for the work or any portion of the work that exceeds the pledge budget and for which there are special funds. In any case where unexpected essential work cost is not provided for in the pledge or special funds, the Fundraising Committee of the Finance Team shall be consulted as shown below.

To plan, schedule and complete maintenance, repair or replacement projects, the following steps are taken:

1. Complete a UUCS Task/Work Order Form (attached). A fund number must be identified for the form to be complete.
2. Have the affected Team or Committee Lead review and approve the Task/Work Order (initial and date) The Committee or Team Lead will not be the one to do the work in most all cases.
3. Once approved, complete a Fund Request or Expense Form (from Office)
4. Designate the Task/Work Order to one of the Congregants identified to complete tasks or work as per their familiarity and/or skills required
5. Provide any indicated follow-up communication with the volunteer completing the work
6. For work requiring outside expertise and contracting (e.g. electrician, plumber, equipment repair/maint.), identify the contractor either previously used to the satisfaction of UUCS, or
7. If cost is estimated to be over \$500, identify three service providers with estimates of their cost and the reason for selecting one over the others.
8. The Task/Work Order initiator is responsible for seeing that the work is carried out to their satisfaction
9. When work is complete, a completed Task/Work Order is placed in the in the Maintenance Binder in the Custodians Closet in the main hall.
10. Communicate the initiation, ongoing status and or completion of Task/Work Orders to the Facilities Team at the monthly meeting held on the last Tuesday of each month at 6:00 pm.
11. If pledge budgeted funds and special funds are not available to complete essential Tasks/Work, a complete and Team or Committee Lead approved Task/Work Order Form shall be forwarded to the Finance Team Fundraising Committee for consideration and scheduling of a special needs fundraiser. No funds may be committed nor expended in advance of that Committee and the Treasurers approval.

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Task Title		Task# (Team Lead Assigned)
Initiator and contact information		
Date Initiated:	Date needed:	
Team or Committee Lead Approval (Print/Sign/Date)		
Task completed by: (Print/Sign/Date)		
<input type="checkbox"/> Maintenance <input type="checkbox"/> <input type="checkbox"/> Repair <input type="checkbox"/> <input type="checkbox"/> Replace or New		
Problem or need statement and background		
Materials required		
Location or System (e.g. outside west Hanneman Hall, Lighting, septic...):		
<input type="checkbox"/> Sanctuary, <input type="checkbox"/> Hanneman Hall, <input type="checkbox"/> Kitchen, <input type="checkbox"/> RE Kitchen <input type="checkbox"/> Office <input type="checkbox"/> Reverends Office, <input type="checkbox"/> RE Classrooms <input type="checkbox"/> Nursery <input type="checkbox"/> Lavatories Corridor <input type="checkbox"/> Lavatory Hanneman Hall, <input type="checkbox"/> Lavatory RE <input type="checkbox"/> Library, <input type="checkbox"/> Parking Lot <input type="checkbox"/> Front Landscape <input type="checkbox"/> Other _____		
Tools required	(
Budget Fund Number: <input type="checkbox"/> 5.116 135 Facilities Maintenance, <input type="checkbox"/> 5.116 115 Equipment Replacement, <input type="checkbox"/> 5.516 125 Landscape, <input type="checkbox"/> 5.116 145 Water/Septic Test, <input type="checkbox"/> 5.116 155 Alarm System Test, <input type="checkbox"/> Other non-pledge budget _____ (see Office for Fund # help)		
Estimated Cost		
Est. Completion Time (hrs)		
Skills required		
Coordinate work with		
Special requirements		
Safety requirements		
Other		