

# Forklift Maintenance Request Document

Request Date:

Requestor Name:

Department:

## Forklift Details

Forklift Model:

Serial/ID Number:

Current Hours:

Location:

## Maintenance Details

Issue Description:

Priority:

Requested Maintenance Type:

Additional Notes:

## For Maintenance Team

Received By:

Date Received:

Action Taken:

Completed Date:

Technician Name: