

Carlson Building Maintenance

Hotel Form

04-04-2026

- **Hotel request must be requested ahead of time.**
- **Select numbers of rooms**
- **Select numbers of beds (Single or double)**
- **Notify the employee to check in by 3pm.**
- **Specify employee name under hotel**
- **Employee name under hotel must have an I.D.**
- **Employee must pay deposit for incidentals.**
- **Any No Call No Show/Cancel will be a company loss.**

District Information			
Dm:	Integration Test		
Job Information			
Store:	9999 Integration Test Store		
Job Information			
Check In:	04-05-2026	Check Out:	04-06-2026
How many rooms:	1	How many beds:	2
Employee Information			
Employee 1	Test Employee	Employee 2	Test Employee
Job Information			
Site visit/Project type:	Partial DSR	Order number:	99927423
Notes			
Integration test - hotel request			
Office use only			
Notes			