



Carlson Building Maintenance

Hotel Form

04-07-2025

- **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: | Jose Martinez

Job Information

Store: | 619 T0863 Menomonee Falls WI

Job Information

Check In: 04-08-2025 Check Out: 04-11-2025

How many rooms: 1 How many beds: 1

Employee Information

New Employee Name | Ramon Dimas de Leon #15671

Job Information

Site visit/Project type: Covering location Order number: T234234

Notes

Covering PTO

Office use only

Notes