Carlson Building Maintenance

Hotel Form 12-01-2025

- 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				
Om: Jose Martinez				
		Ioh Inf	ormation	
Store: 619 T0863 Menomonee Falls WI				
of Frenchione Lans Wi				
Job Information				
Check In:		12-01-2025	Check Out:	12-06-2025
How many rooms:		1	How many beds:	2
Employee Information				
New Employee Name		Milagro Garcias Mejias #16303 & Nathaniel		
Job Information				
Site visit/Project type:		Partial DSR	Order number:	T234234
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NT /				
Notes				
Office use only				
N				
Notes				