REQUEST FOR SERVICES
ADM-001 SCHEDULE A

Municipality of Centre Hastings
7 Furnace Street, P.O Box 900,
Madoc, Ontario K0K 2K0
Tel: 613-473-4030
Fax: 613-473-5444
www.centrehastings.com

RFS#_____

Once submitted, your request will be forwarded to the appropriate Dept. Manager for review.
Lines with (*) must be filled in

Date* _____

Your Name* _____

Email Address _____

Contact Telephone* _____

Department* Operations: Roads Waste Facilities Park Maintenance
Fire Department Finance Council Services
Other:_____

Location of Issue_____

Description of Service Required * _____

Tracking Information - for office use only

Date:
Received by:
Assigned to:
Brief description of Action Taken:_____
_____
_____

Closed by: _____ Date: _____