

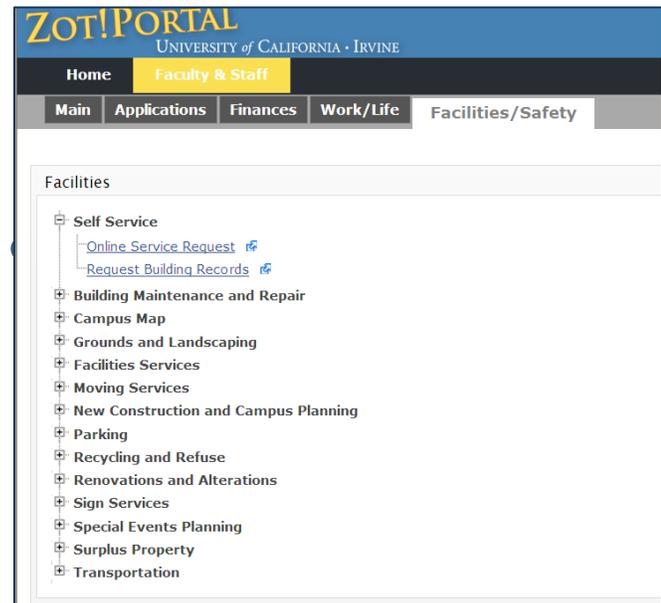
HOW TO SUBMIT A FACILITIES MANAGEMENT SERVICE REQUEST

In an effort to better track and manage work requests please utilize the Facilities Management online Service Request form..

General Steps to Complete and Submit a Facilities Management [Online Service Request](#)*

***Online Service Request** are formerly also known as a **Facilities Management Request (FMR)**

1. Go directly to the online request form at:
http://apps.adcom.uci.edu/expresso_fac/ess/MainController.do
OR
Visit ZotPortal at <http://zotportal.uci.edu/>
 - Click on “Faculty & Staff” tab on the top menu.
 - Click on “Facilities/Safety”.
 - Click on “Self Service”.
 - Click on “[Online Service Request](#)”.Enter your valid and active UCI netID and password.
2. Select the type of request you would like to create.
3. Complete all required fields (marked with an *) and complete any other pertinent information related to your service request.
4. Click on the “Submit Request” button on the bottom of the form to complete your request.



Tips for requesting service:

1. The online form provides for including more detailed documentation directly in your request. Include/upload additional documentation in the **Attachment** Section of the online form:
 - a. Click on **Add Attachment**,
 - b. Click on **Browse** and selecting a documents or picture to upload,
 - c. If you want to add additional attachments, click on **Add Attachment** to browse and select again.
2. If an event or external activity is “calendared” for a specific date/time and requires that the work be completed by a certain date/time, please indicate this clearly in the description field and include a “**Date Needed by**” in the **Additional Details** Section. Facilities Management will follow up within 72 hours to confirm they are able to fulfill your request.
3. Use the “Find” icon in the **Request Details** Section to select the building, floor, and room by name, CAAN ID, or map number. Parks, Plazas, Parking Lots and Structures, and major streets are included in the Building Name List. If you do not find the primary location you are looking for, choose the nearest structure listed. If there is no floor or room, click “Close” to exit. Enter any additional specific location details in the request description.

Repair / Renovation Request

All fields marked with an * are required.

Requested By

* Name

* E-mail

Home Department

Phone Number

Fax Number

Mobile Number

Building Name 

Floor

Office

Requested For

Requested by is the same as requested for

Name 

E-mail

Home Department

Phone Number

Fax Number

Mobile Number

Building Name 

Floor

Office

Request Details

Please use the 'Find' icon to select the building, floor, and room by name, CAAN ID, or map number. Parks, Plazas, Parking Lots and Structures, and major streets are included in the Building Name List. If you do not find the primary location you are looking for, choose the nearest structure listed. If there is no floor or room, click 'Close' to exit. Enter any additional specific location details in the request description.

* Building Name 

Floor

Room Number

* Request Description (700 character maximum, include any tag or blanket information)

- Is this a request for Facilities Management Trades support on a Capital construction project?
- Will this request change the use of this space?
- Are there restrictions on this work, such as sensitivities to noise, scheduling, etc?
- Does Environmental Health and Safety (EH&S) need to be contacted?

Estimates

Do you require an estimate prior to the start of work?
 Estimates for jobs over \$1,000 are provided for free and take approximately 2-3 weeks to prepare.

Estimates are not provided for jobs under \$1,000.

Listing of Common Jobs Usually Completed Under \$1,000

- Yes, I have reviewed the common job listing, and have determined my job is above \$1,000. Please proceed with a free estimate.
- No. If there is a maximum cost allowance please include it in the request description.

Attachments

Add Attachment

Additional Details

Date Needed By (MM/DD/YYYY) 

Authorized By

Billing Information

 Account / Fund information will be verified by the responsible parties.
 See Maintenance Funding Guide for Account/Fund information

Account Code	Fund Code	Sub Code	Project Code	Split Percentage
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	100