School of Arts and Social Sciences – Southern Cross University

D-Block Arts Complex

*** FAULT REPORT ***

Lodge this form @ D1.10 Operations Office

If this is Urgent! Discuss with Technical staff.

Name: (your name) __________________________________________

Contact Details: (if required) __________________________________

Detail the problem or equipment fault:

Tell us where, when, what, how or anything that may help resolve the issue.

ROOM/LOCATION D ___ . ___ ___ Computer Workstation # _____

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Received: _______ Date: ___/___/____ Forwarded to: __________

Date Completed: ____/____/____ Initials: ______

FR # 2009