

Submit to: aoc.fixedassets@mdcourts.gov or
dcmfixedassets@mdcourts.gov

LOCATION MAINTENANCE REQUEST

Agency (AOC/CC or District Court): _____

Requestor: _____ Requestor Phone #: _____

Work Location: _____ Work Email: _____

Request Date: _____ Date Needed: _____

New Parent/Building: ☐ New Child/Room: ☐ Change: ☐ Inactivate: ☐

New or Revised Location Request Detail Information (fill in all applicable fields):

Child Loc Code (if known): _____ GEARs Parent Code (if known): _____

Facility Name: _____

Street Address: _____ County: _____

City: _____ State: _____ Zip: _____

Room # _____ Room Description: _____

☐ A spreadsheet with full details has been attached for a multiple location request.

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Asset Management Section

Approved by: _____ Date: _____

(AOC or DCM Fixed Asset Manager)

Submit to: locationrequest@mdcourts.gov

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GEARS Location Support Section

Approved by: _____ Date: _____

(GEARS Configuration Staff)

Action Required and Completed:

New Parent/Building Location Entered in GEARS ☐ _____

New Child/Room Location Entered in GEARS ☐ _____

Submit confirmation setup email to FA Manager.