



Property Maintenance Request

Tenant Information / Repair Request

Property Address: _____ Date: _____

Tenant Name/s: _____

Contact Phone : _____ Email : _____

Maintenance Requested/Required:

- | | | | |
|-------------------------------------|---|-------------------------------------|---|
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Locksmith | <input type="checkbox"/> Tv/Antenna | <input type="checkbox"/> Pest Control |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Appliance Repair | <input type="checkbox"/> Building | <input type="checkbox"/> Other <i>(specify above)</i> |

Description of repair/maintenance requested:

Availability for Repairs to be carried out:

- | | | | |
|---------------------------------|-----------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday |
| <input type="checkbox"/> Friday | <input type="checkbox"/> Saturday | <input type="checkbox"/> 8am – 12pm | <input type="checkbox"/> 12pm – 5pm |

Tenant/s Signature *Date*

Approval to Hire *(office use only)*

Approved Date: _____ Reason: _____

Declined Date: _____ Reason: _____

Property Manager Signature *Date*

Confirmation of Repair Booking *(office use only)*

Comments: