

REPAIR REQUEST

DATE: / /

TENANT'S NAME: _____

ADDRESS: _____

CONTACT: _____

(Please provide at least 2 contact numbers.)

REPAIRS

REQUIRED:

(Please provide as much detail as possible)

HOT WATER

If **hot water** service is it electric or gas? Electric Gas

Have you checked the pilot light? Yes No (Service calls to re light pilot lights may be charged to the tenant)

POWER

If power related, have you checked the fuses? Yes No (Service calls to blown fuses may be charged to the tenant)

ACCESS FOR TRADESPERSON: Use the Agency's key Call to arrange access

PLEASE NOTE: Should a trades person be sent to your property at your request and deem there to be no fault found (ie. wrong settings on the remote for split systems) the account will be forwarded to you for payment.

Tenant Signature

REPAIR REQUEST

OFFICE USE ONLY

LL Contacted- Date ____/____/____ By Phone Email

LL Instructions _____

Confirmed Completed. Date- ____/____/____
