

Repair Request Form and Checklist

Property Address _____

Tenant(s) _____

Date ____ / ____ / ____

Contact Details

Name _____

Relationship to Tenant _____

W: _____ H: _____

M: _____ Email: _____

Repairs Requested:

This form may be either:

- Lodged in person at _____
- Mailed to the above address
- Faxed to us at _____
- Completed and submitted online at www. _____

Office Use Only	Completed
• Date received	____/____/____
• Time received	_____ am / pm
• Date entered into computer	____/____/____
• Landlord advised and approval given YES / NO	____/____/____
• If NO, Tenant advised and Action and Conversation diary updated	____/____/____
• If YES, job given to:	
• Work Order No.	

Property Managers signature: _____