

REPAIR REQUEST FORM

In order for our office to process your repair request & as per the requirements of your lease, please fill out the following details:

DATE: _____

TENANT NAME: _____

ADDRESS: _____

BEST CONTACT NUMBER: _____

REPAIRS REQUIRED: _____

NAME & MODEL: _____

(if applicable)

I/we understand that the property will now have to be access by the appropriate tradesperson if the landlord gives the requested repair approval. I understand that I/we may be liable for rescheduling fees if access is not granted.

TENANT SIGNATURE: _____

Office use only:

Approved by owner: yes no

Details: