



Resident Maintenance Request

Resident Name: _____

Address: _____ Unit: _____

City: _____ Date: _____ Time: _____

Contact Tel: _____ (best number to reach you, alternate number, and e-mail)

Alternate Tel: _____ E-Mail: _____

By completing this form, I request, and give my permission for the appropriate maintenance technician to enter my residence to repair the item(s) listed below. If our maintenance technician cannot gain access by reasons within your control, there will be a minimum \$35 trip charge billed to your account.

Do you have a pet or other reason we cannot enter alone to perform the requested items? YES / NO

If so, please explain: _____

Requested Date: _____ Time: _____ (Please give us at least 2 days advanced notice)

1.	
2.	
3.	
4.	
5.	

** Please be sure to be familiar with the terms of your lease, items that are your responsibility (clogged drains, tripped circuit breakers, etc.) will be charged back to the resident. Unnecessary maintenance requests, at the sole discretion of the maintenance technician, will also be charged back to the resident.

Signature

Resident

Received: _____ (date)

By: _____

W/O issued: # _____