Maintenance request

TENANT AND UNIT

Date submitted

Tenant name

Unit

Property address

Phone

Email

Preferred contact

Best time to reach you or to enter

ENTRY

Permission to enter if I am not home?

- ○ Yes
- ○ No

Pets in the unit?

- ○ Yes
- ○ No

Pet details (type, where they will be)

THE PROBLEM

Category

Where in the unit

How urgent is it?

- ○ Emergency
- ○ Urgent (24-72 hours)
- ○ Routine

> **Gas smell, fire, smoke, a carbon monoxide alarm, flooding or sparking?** Do not fill in this form first. Leave the unit, call 911 or the gas or power utility, then call the manager.

Describe the problem

When did it start?

Has it happened before?

○ Yes ○ No

Photos help. Attach them when you email this form, or text them separately with your unit number.

Tenant signature

Date

Work order

Work order #

Date opened

Priority

Linked request (date, unit, tenant)

Assigned to (technician or vendor)

Their phone or email

Scheduled date and window

Entry notice given (date and method)

LABOR

TECHNICIAN	HOURS	RATE	AMOUNT

MATERIALS

ITEM	QTY	UNIT COST	LINE TOTAL

ITEM	QTY	UNIT COST	LINE TOTAL

Labor subtotal

Materials subtotal

Tax % (on materials)

Tax

Grand total

COMPLETION

Time in

Time out

Status

Work performed and completion notes

Follow-up needed?

- ○ Yes
- ○ No

Technician signature and date

Tenant sign-off and date