



MAINTENANCE REQUEST

Urgent ? YES NO

DATE REQUESTED: _____

TENANT NAME: _____

ADDRESS: _____

PHONE #: _____ ALTERNATE # OR EMAIL: _____

PERMISSION TO ENTER? Urgent ? YES NO

TENANT SIGNATURE: _____

DESCRIPTION OF PROBLEM:

WORK COMPLETED AND MATERIALS USED:

SMOKE DETECTOR: _____

CO DETECTOR: _____

START DATE / TIME : _____ COMPLETION DATE / TIME: _____

WORK COMPLETED BY THK STAFF: YES NO

SIGNATURE: _____

WORK ORDER #: _____ SUPPLIER: _____

MAINTENANCE MANAGER SIGNATURE: _____ DATE: _____