

Repair Request Form and Checklist

Date: _____ / _____ / _____

Property Address: _____

Tenant/s: _____

Phone: _____ Work: _____

Mobile: _____ E-mail: _____

Repair/s Requested:

Date identified/commenced:

Authority for office/repairer to enter the property with keys in order to carry out the repair:
 Yes / No Tenant: _____ Signed: _____
 Date: _____

CHECK LIST – OFFICE USE ONLY

Notice Received: Mon / Tues / Wed / Thurs / Fri / Sat / Sun Date: _____ / _____ / _____
 Time Received: _____ am / pm Computer input: _____ / _____ / _____
 Landlord Advised: _____ / _____ / _____ Approval Given: Yes / No _____ / _____ / _____
 if No, tenant and landlord letters sent: _____ / _____ / _____ PM: _____
 if Yes, job given to: _____
 Work order No. _____ Work order sent: _____ / _____ / _____
 Tradesperson to use office keys confirmed? Yes / No Date: _____ / _____ / _____
 Tenant contacted to arrange access? Yes / No Date: _____ / _____ / _____

COMPLETION

Date invoice received: _____ / _____ / _____ Invoice No. _____
 Confirmed work has been completed? Yes / No Date: _____ / _____ / _____
 Staff: _____ Confirmed with: _____
 Invoice amount: \$ _____ Entered: Yes / No _____ / _____ / _____
 Staff: _____ Signature: _____
 Date completed and filed: _____