

Maintenance Request Form

Property address: _____

Tenants name(s): _____

Contact Number: Mobile: _____ Home: _____ Work: _____

Email Address: _____

This form is only to be used for repairs that are NOT of an Urgent or Essential nature.

Essential Services are defined as repairs required to the electricity, gas, water (including hot water), and refrigerator (if supplied with the property). An arrangement for repairs must be made within 24 hours of being reported.

Urgent Repairs are not to that of a defined essential service but may cause damage to the property or injury to a person. An arrangement for these repairs must be made within 48 hours of being reported.

For Urgent or Essential Repairs - please contact the office on 08 9351 8411 or your Property Manager directly.

Checklist

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|--|----------|
| 1. Are there any leaking taps or shower heads? | Yes / No |
| 2. Are there any leaks under any of the sinks/basins? | Yes / No |
| 3. Are there any water leaks affecting walls or cupboards (i.e. behind showers)? | Yes / No |
| 4. Are there any leaks behind or inside the toilet? | Yes / No |
| 5. Are there any water stains to any ceilings or roof leaks? | Yes / No |
| 6. Are there any faulty power points or light switches? | Yes / No |
| 7. Are there any light fittings not working (not a blown globe)? | Yes / No |
| 8. Are there any faults with the stove, oven, grill or range hood? | Yes / No |
| 9. Are there any doors or windows which cannot be secured? | Yes / No |
| 10. Are there any steps, railings or balconies that are not secure? | Yes / No |
| 11. Are there any issues with the gutters or downpipes? | Yes / No |
| 12. Have you noticed any evidence of white ant activity or wood rot? | Yes / No |
| 13. Are there any doors or windows that you do not have keys for already? | Yes / No |
| 14. Have you noticed any new or existing cracking becoming worse? | Yes / No |

If you have answered yes to any of the above or have any other maintenance issues - please explain further:

Are you happy for the contractor/s to collect the keys from our office to attend to maintenance items: Yes / No

 Tenant Name Tenant Signature Date

Office Use Only

Date Received	Owner Contacted	Instructions