

Maintenance Request Form



Date: _____

| TENANT NAMES: | |
|---------------|----------|
| Tenant 1 | Tenant 2 |
| Tenant 3 | Tenant 4 |

| CONTACT DETAILS: | |
|------------------|---------|
| Home Phone: | Work: |
| Mobile: | Mobile: |

It is a policy of our office that all repairs or complaints must be in writing and must be advised as soon as possible. In order for repairs/complaints to be attended to, please complete this form and fax, post or deliver to our office. Either a representative from our office or a tradesperson will be in contact with you.

We are an independently owned and operated business. We are bound by the National Privacy Principles. We may be collecting personal information about you by various methods throughout the tenancy to enable us to manage and maintain the premises as per the Residential Tenancies Act. We may disclose personal information about you to the owner of the property and to contractors (approved and authorised by Ray White) in the course of our day to day duties. You have the right to access personal information that we hold about you by contacting our privacy officer.

| PROPERTY: |
|-----------|
| |

| MAINTENANCE REQUIRED: |
|-----------------------|
| |
| |
| |
| |
| |

If the problem is of an EMERGENCY nature, PLEASE PHONE FIRST and then confirm in writing.

| PLEASE TICK THE OPTIONS WHICH APPLY REGARDING APPLIANCES: |
|---|
| <input checked="" type="checkbox"/> Stove – Gas / Electric <input checked="" type="checkbox"/> Oven – Gas / Electric <input checked="" type="checkbox"/> Hot Water – Gas / Electric |

| PLEASE TICK THE OPTION WHICH APPLIES REGARDING ENTRY: |
|--|
| <input checked="" type="checkbox"/> Use office keys and enter at your convenience |
| <input checked="" type="checkbox"/> Phone me between _____ and _____ to make an appointment to enter |

| TENANT CONFIRMATION: |
|--|
| I/we authorise your office and / or the tradesperson to enter the property as above in order to carry out the repair or to view the repair |
| Signature: _____ Date: _____ |
| Signature: _____ Date: _____ |

| OFFICE USE ONLY |
|--|
| Received By: _____ Date: _____ |
| Lessor Name: _____ Lessor Approval: Yes No |
| Job Number: _____ Tenant Notified: Yes No |
| Invoice Received: Yes No Invoice Authorised: Yes No |
| Notes: _____ |