

REPAIR REQUEST

Office Use Only

W.O.#: _____

CODE: _____

Date: _____

Tenants Name: _____

Property Address: _____ Apt. No. _____

Telephone: (Work) _____ (Home) _____ (Cell) _____

Please mark one of the following....

_____ I wish to be home when the repairs are made.
I am available: 1st choice _____
 2nd choice _____
 3rd choice _____

_____ I give my permission for the Maintenance Manager or other Jamison Management Co. representative to enter my apartment to complete the necessary repairs while I'm out.

REPAIR REQUESTS:

- A. _____

- B. _____

- C. _____

- D. _____

****PLEASE RETURN FORM TO MANAGER ONCE COMPLETED****

MANAGER'S AUTHORIZATION

By signing below, I acknowledge that I have reviewed the maintenance issue and authorize work to be performed at the property noted above:

Manager Signature: _____ DATE: _____