

Maintenance Request Form

Date: _____

PROPERTY:

TENANT DETAILS:	
Tenant 1:	Tenant 3:
Tenant 2:	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 Principals. 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 Burns Archer Realty) 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.

MAINTANANCE 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 type="checkbox"/> Stove – Gas / Electric <input type="checkbox"/> Oven – Gas / Electric <input type="checkbox"/> Hot Water – Gas / Electric

PLEASE TICK THE OPTIONWHICH APPLIES REGARDING ENTRY:
<input type="checkbox"/> Use office keys and enter at your convenience
<input 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
Invoice Received: Yes No	Invoice Authorised: Yes No
Notes	