

Maintenance Request Form

Association Name: _____

Owner's Name: _____ Unit #: _____

Address: _____

Home Phone: _____ Work/Cell: _____

Email: _____

Date of problem: _____ Emergency call made: **YES** **NO**

Occurrence: **FIRST TIME** or **REPEAT – PREVIOUS DATE:** _____

Description of problem: _____

(Co-Owners Signature)

(Date)

Managing Agent Use Only

Verified By: _____ Date: _____

Comments: _____

Work Order Sent: _____

Response to Co-Owner

The Board of Directors has reviewed your request and determined that:

- Your maintenance request has been APPROVED and will be forwarded to the proper contractor to handle. You will be contacted by the Management Company to schedule your repairs.
- Your maintenance request has been DEFERRED in order to combine with other, similar requests.
- You will be notified by the management company when your request is processed.
- The board has determined that your request is NOT THE RESPONSIBILITY of the Association to repair.
- OTHER: _____

(Signature of Managing Agent)

(Date)