

rentals@professionalswodonga.com.au

MAINTENANCE REQUEST

Address of Property:	Da	te:
Tenant Name(s):		
Mobile:		
Phone (w):		
The following repair items require attention:		
1		
2		
2		
3.		
4		
Please note: If the repairs needed are for an appliance, please advise whether it is gas or electric and provide the make and model number. This will speed up the process of organising the repair. I authorise the key to be used to resolve the repair. I would prefer to be contact to make a time with tradesman / owner to attend. I acknowledge that my contact information may be provided to either the contractors engaged by Professionals Wodonga or the owner of the property to facilitate contact in order to carry out the repairs. Tenant Name Signature Date		
Tenane Name	Signature	Date
Office Use Only		
Date Received:		
Entered into Console: Yes / No		