



Repairs request form

Date: ___ / ___ / _____

Address of Property: _____

Tenant/s Name: _____

Tenant/s Contact Number: _____

Repair Details: _____

For hot water service or stove repair please nominate: GAS or ELECTRIC

Hot water service: INSIDE or OUTSIDE
Checked Meter Box: (switch on) YES / NO
Any signs of Leaks: YES / NO if yes explain where it is leaking from:

Date of Manufacture (if possible): ___ / ___ / _____
Size of hot water system: _____ LITRE

I/We give permission for the trade’s people to use the office set of keys: YES / NO

I/ We would prefer the trade’s person to contact me directly to arrange access: YES / NO

Name: _____
Signature: _____

Email form to: Propertymaintriv@gmail.com

Fax form to: (02) 9627 9337

Drop into office address: 26 Garfield Rd East, Riverstone NSW 2765

OFFICE USE ONLY:

Date Received: ___ / ___ / _____
Called Landlord on ___ / ___ / _____ Emailed Landlord on ___ / ___ / _____
Owner Response: _____

Notes: _____

URGENT REPAIR:	NON URGENT REPAIR:
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