

Fax - 4822 8722

Email - repairs@goulburnre.com.au

MAINTENANCE REQUEST FORMS

DATE:	ADDRESS:	
CONTACT NAME:_		
SIGNATURE:		
PHONE:		
ACCESS DETAILS:	☐ PHONE FIRST	☐ TAKE OFFICE KEY please sign below
<u>In accor</u>	rdance with your tenancy all	repairs must be reported in writing.
details that relate to t	he problem including the bra	nplete the repair advice being sure to include all and, model no. and whether it is gas or electric by the quicker we are able to have the problem
You will be notified	by SMS or email within 48 ho	ours to confirm the appointment of a contractor
APPLIANCE:		_gas or electric:
BRAND:		_MODEL NO:
MAINTENANCE ISSU	JE/REQUEST:	
Tenant Confirmation I / we hereby author order to conduct the	rise your office and/or the rep	pairers to enter the property with the keys in
Tenant Signature		<i>Date</i> _