

# Maintenance/Repair Request

Date: \_\_\_\_\_

Resident's Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_ Apartment # \_\_\_\_\_

## Repair / Maintenance Job – please be specific

Details of Repair	Where is Repair Located	When & How did this Occur
1.		
2.		
3.		

If repair is for an appliance please complete below:

Make: \_\_\_\_\_ Brand: \_\_\_\_\_ Model: \_\_\_\_\_  Gas  Electric

Pet in residence?  Yes  No

- I authorize contractors to use keys held by Lawson Property Management to gain access to the property, without the need for further notice to me.
- I do not authorize contractors to use keys to gain access to the property, please contact me to arrange access.
- I acknowledge that my contact information may be provided to either the contractors engaged by Lawson Property Management or the owner of the property to facilitate contact in order to carry out the repairs.

Tenant Name

Signature

Date

\_\_\_\_\_

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### FOR MANAGEMENT USE ONLY:

Date Request Received: \_\_\_\_\_

Date Assigned to Vendor: \_\_\_\_\_

Agent / Representative: \_\_\_\_\_

Work Order #: \_\_\_\_\_