



MAINTENANCE / REPAIRS REQUEST

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|--|--|
| Date: | |
| Tenant's Name: | |
| Address: | |
| Home Phone: | |
| Work Phone: | |
| Mobile Phone: | |
| Email: | |
| Repairs Required: <i>Please provide as much detail as possible.</i> | |
| Access for Tradesperson: <i>Please circle</i> | Use agency key Call to arrange access |

By signing this form below, I, the Tenant consent to the passing of my name and contact details onto tradespeople for the sole purpose of gaining access to the property in order to complete any required maintenance and/or quotes that may be required to be attended to, as per the lessor's instructions. I also consent to tradespeople entering the property by the method I have circled above, and only after I have been notified of a date and time of entry, in accordance with the Residential Tenancies Act 1994.

Tenant Signature:

PLEASE FAX THIS FORM TO 5591 8855