

MAINTENANCE REQUEST AND ACTION REPORT**PROPERTY:** _____ **WORK ORDER #** _____**SECTION I (Section I to be completed by Tenant or Resident Manager depending upon method of request)**

LOCATION:	AUTHORIZATION:	TENANT INSTRUCTIONS:
APARTMENT # _____	Tenant Name: _____	Yes No ▪ 24 Hour Notice is required for apartment entry [] [] ▪ Maintenance Personnel must be accompanied [] []
COMMON AREAS:	Contact Telephone #'s: _____	<input type="checkbox"/> SPECIAL TENANT INSTRUCTIONS:
<input type="checkbox"/> Grounds <input type="checkbox"/> Building # _____ <input type="checkbox"/> Shop <input type="checkbox"/> Office <input type="checkbox"/> Laundry <input type="checkbox"/> Community Bldg. <input type="checkbox"/> Other:	Method of Request: <input type="checkbox"/> Tenant Written Request (sign below) <input type="checkbox"/> Tenant Verbal Request: Date: _____ Time: _____ Person Making Request: _____ <input type="checkbox"/> Resident Manager Request	
DESCRIBE PROBLEM:		

 TENANT SIGNATURE (if request is made in writing): _____ **Date:** _____**SECTION II (Section II to be completed by Resident Manager)**

<input type="checkbox"/> Emergency	<input type="checkbox"/> Safety	<input type="checkbox"/> Preventative Maintenance	<input type="checkbox"/> Tenant Request
<input type="checkbox"/> Move-In Inspection	<input type="checkbox"/> Corrective Maintenance	<input type="checkbox"/> Periodic Inspection	<input type="checkbox"/> Other
<input type="checkbox"/> OUTSIDE CONTRACTOR WORK APPROVED BY PROPERTY MANAGER:	DATE:	DESCRIBE CONTRACT WORK:	
24 Hour Notice Posted: [] Yes [] No	Date:	Time:	

SECTION III (Section III to be completed by Maintenance Technician)

<input type="checkbox"/> Maintenance Tech At Work Sign posted	Describe Repairs Made:	
TIME LINE	DATE	MATERIALS FOR TENANT DAMAGE
Request Received:		LIST PARTS USED BELOW and (List Costs if Known)
Repairs Started:		
Repairs Completed:		
Hours Worked:		
AMOUNTS DUE FROM TENANT:		
\$ Labor hrs. X \$ =	\$	
\$ Parts Cost =	\$	
TOTAL DUE:	\$	

Certification of Action Taken: By signing below, we certify that the above information is true and correct and that the work has been completed as described in a good and workmanlike manner.**Maintenance Technician:** _____ **Date:** _____**Resident Manager:** _____ **Date:** _____

WHITE COPY: Boise Office; YELLOW COPY: Maintenance File; PINK COPY: Resident's Copy