

Repair Request Form and Checklist

Property: _____

Tenant: _____

Date: _____

Contact details:

Name: _____

Relationship to tenant: _____

Work: _____ Home: _____

Mobile: _____ Email: _____

Repairs requested:

How long has this condition existed?

Can our tradesperson enter if you are not there? Yes / No (circle one)

If not, what is your preferred day and time for repair? _____ at _____ am/pm

This form may be either:

Lodged in person at **222, City Walk, Canberra City ACT 2601**

- Mailed to us at the above address
- Faxed to **02 6257 3532**

Thank you for reporting this matter to our office.

Someone will be in touch with you within one business day to advise what action will be taken.