



COMMUNITYWORKS NON-PROFIT HOUSING CORPORATION

DATE: D / M / Y

UNIT # PHASE 3

REQUEST FOR MAINTENANCE REPAIRS

NAME: PHONE #:

DESCRIPTION OF MAINTENANCE REPAIR(S):

COMMENTS (Office use only)

Multiple horizontal lines for describing the repair and providing comments.

PERMISSION TO ENTER APARTMENT (SIGN ONE OF THE FOLLOWING)

I give permission to Communityworks Non Profit Housing Corporation to have the Maintenance staff enter my Unit in my absence for the purpose of attending to the above mentioned problem(s). Work will occur between 8:00 a.m. and 4:00 p.m.

Signed: _____

OR

I DO NOT give permission to Communityworks Non Profit Housing Corporation to enter my Unit in my absence. I am available at the following day/time to be present while the Maintenance staff attends to the above mentioned problem(s).

Day & Time Available: (Tuesdays only between 8:00 a.m. and 4:00 p.m.)

PLEASE SUBMIT THIS WORK REQUEST FORM TO THE OFFICE

For Office Use: Date Rec'd: Work Completed:

Tenant(s) Signature – Work Completed: Tenant Not Home:

Work Order #

COMPLETION INFORMATION (Office use only)

Completed Remarks:

Materials Used:

WORK ORDER COSTS

Approximate Material Cost: _____

Approximate Labour Cost: _____

Labour Time: _____

Should Resident Pay: Y / N (circle one)

Bill Amount: _____

Worker's Signature: _____