

Maintenance Work Request

Name of Tenant: _____

Address: _____ Phone: _____

Date of Request: _____

Description of Problem: _____

May the repair person enter your unit in the event that you are not at home?

_____ YES _____ NO

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Date Request Received: _____ Assigned Priority: _____

Description of Work Done: _____

Cost: _____ Bills Attached: _____ YES _____ NO

Date Work Completed: _____ Hours to Complete _____

Signature of Maintenance Worker : _____
(indicating work completed)

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Follow Up by Kairos Manager:

Date Contacted: _____ By Who: _____

Was the Tenant Satisfied: _____ YES _____ NO