



Maintenance Request Form

Address of Property:

Date:

Tenant Name(s):

Mobile:

Email:

Phone (w):

Phone (h):

The following repair items require attention:

1.	
2.	
3.	

Please note: If the repairs needed are for an appliance, please advise whether it is gas or electric and provide the make and model number. This will speed up the process of organising the repair.

- I hereby authorise The Links Carina, its employees and contractors to use the keys to the above property held by The Links Carina to gain access to, investigate and if applicable, carry out the repairs at the above property, without the need for further notice to me.
- I do not authorise The Links Carina, its employees or contractors to use the keys to the above property held by The Links Carina and undertake to personally provide access to the property at a time to be advised by The Links Carina contractors. I freely acknowledge that if I make such arrangements and then fail to provide access to the property, I will be personally liable for any charges made by The Links Carina contractors for travelling to and from the property.

I acknowledge that my contact information may be provided to either the contractors engaged by The Links Carina or the owner of the property to facilitate contact in order to carry out the repairs.

Tenant Name	Tenant Signature	Date
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Office Use Only

Date Received	Owner Contacted	Instructions