Service request form for tenants

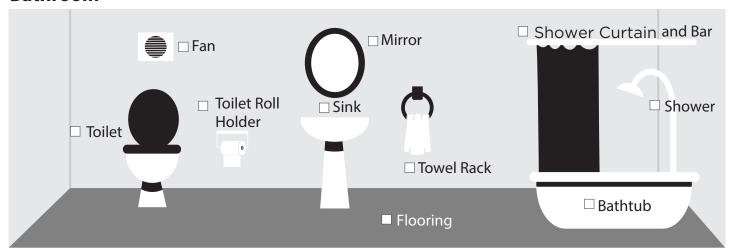
For Office Use Only

Urgent	Non-Urgent
Action taken:	
Outcome of service request:	
Date and method tenant notified of resolution:	
Date copy provided to tenant (if requested):	
Tenant information	
First name:	
Last name:	
Phone number:	
Email:	
Service request date (yyyy/mm/dd):	
Service request time in 24 hour format (hh:mm):	
Address of service requested	
Street number:	
Street name:	
Unit/Apartment/Suite:	

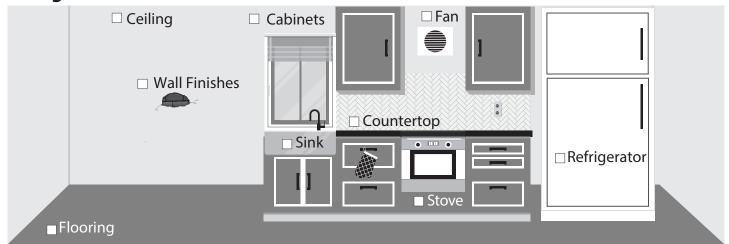


Please Indicate 🚺 Item(s) that require servicing/repairing

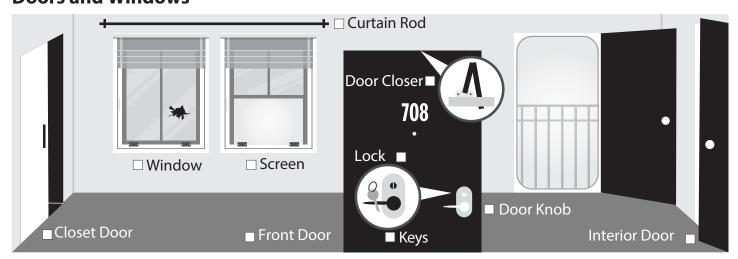
Bathroom



Living Areas



Doors and Windows



Other

