



Maintenance Requisition Form

Name:	Date:
Address:	Unit Number:
Daytime phone number:	
Description of maintenance or repair needed:	
Signature: _____	
Note: If we cannot complete this requisition within 48 hours, we will contact you accordingly.	
---Office Use Only---	
Received by:	Date:
Sent to: <input type="checkbox"/> In-House <input type="checkbox"/> Contractor Other: _____	
Projected start date:	
Date and time work started:	
Work completed by:	Date recipient advised:
Work Details:	
Invoice: <input type="checkbox"/> Billed to Owner	<input type="checkbox"/> Association Responsibility
*All repairs billed to owner will be @ \$75/hr. minimum 1hr.	

Work Order # _____