

Apartment Repair Request

PROPERTY NAME	DATE	TIME
		AM / PM
STREET ADDRESS	APARTMENT #	WORK ORDER #
REQUEST TAKEN BY	DATE TO DO REPAIR	TIME TO DO REPAIR
		AM / PM
TENANT'S NAME	EMAIL	PHONE NUMBER
DESCRIBE THE PROBLEM, WHAT NEEDS TO BE REPAIRED, LOCATION		
OK TO ENTER	YES	NO
PETS	YES	NO
PRIORITY LEVEL	URGENT HIGH MEDIUM LOW	
ASSIGNED TO		
COMMENTS & NOTES		
COST OF REPAIRS	_____ Hr _____ Min	\$ _____
COMPLETED BY	DATE	TIME
		AM / PM