



COMPASS

PROPERTY MANAGEMENT
CORPORATION

PO# _____

RESIDENT MAINTENANCE / REPAIR REQUEST

Date: _____

Unit Address: _____

Resident's Name: _____

Phone (Home): _____ Phone (Cell): _____

Problem:

Comments (including best time to make repairs):

I authorize entry into my unit to perform the maintenance or repair requested above in my absence unless stated otherwise above.

Resident

.....
FOR MANAGEMENT USE

Done: _____

Time Spent: _____ hours Date Completed: _____

Unable to complete on _____ 20_____ because _____

Date: _____

Landlord/Manager