



MAINTENANCE REQUEST FORM

DATE: _____

TENANT'S NAME: _____

ADDRESS: _____

CONTACT: (H) _____ (W) _____ (M) _____

Email _____

TYPE OF REPAIR: Electrical: Gas: General Maintenance:

REPAIRS REQUIRED _____

(Please provide
as much detail as
possible)

ACCESS FOR Use the Agency's key Call to arrange access

TRADESPERSON:

THIS FORM MAY BE EITHER:

1. Faxed to **08 6313 4270**
2. Emailed to **admin@focuswestproperty.com.au**