



Repair Form

PROPERTY ADDRESS _____

TENANTS

NAME: _____ DATE: _____

CONTACTS:(W) _____ (M) _____

(H) _____ (F) _____

EMAIL _____

NATURE OF REPAIR REQUEST: PLEASE BE SPECIFIC WITH FULL DETAILS.
PLEASE PRINT CLEARLY.

If the problem relates to an electrical appliance please complete the following:

APPLIANCE: _____

BRAND & MODEL: _____

GAS OR ELECTRIC: _____

HAS THIS HAPPENED PREVIOUSLY: _____

ACCESS ARRANGEMENTS:

A) WILL THERE BE SOMEONE HOME FOR ACCESS: _____

B) CAN OUR TRADES PEOPLE USE OUR KEYS FOR ACCESS _____

C) I MUST BE CONTACTED ON: _____

We may be collecting personal information about you by various methods throughout the tenancy to enable us to manage and maintain the premises as per the Residential Tenancies Act. We may disclose personal information about you to the owner or the property and to contractors (approved and authorized by Wilkinsons Real Estate) in the course of our day to day duties. You have the right to access personal information that we hold about you by contacting the Principle. PLEASE NOTE— Should a tradesperson be called out and the problem is found to be related to the appliance being incorrectly used or one of your appliances was proven to be faulty, YOU MAY BE LIABLE FOR THE SERVICE CALL OUT FEE. If a tradesperson is called without permission for anything other than an emergency repair, YOU MAY BE RESPONSIBLE FOR THE PAYMENT OF THE ACCOUNT.

I, _____, HAVE READ AND AGREE WITH THESE TERMS.

SIGNED: _____ DATED: _____

PLEASE PRINT OUT AND KINDLY FAX TO

WILKINSONS RIVERSTONE 9627 1332