

Email: rentals@justrealestate.com.au	
PO Box 343, Narre Warren 3805	

Date received:				

MAINTENANCE REQUEST FORM

	MANUL ILLU	<u> </u>	
Property Address:			
Tenant/s Name:			
Contact Phone Numbers: (W)		(H)	
(M)	(Email)		
Specific Repair Request Details:			
Appliance Gas/Elec	otric	Make	Model
Access:			
1. Enter at repairers convenience	using office key/s		Yes/No
2. Ring day best time	to arrange re	epair appointment	Yes/No
3. If the repair falls under Emergency Landlord spoke to: Date/Time: Instructions: Repairer: Date/Time: Action:			omplete form.
Privacy: It is a policy of our office that all repairs order for repairs/complaints to be attended to, representative of our office or a tradesperson wibusiness. We are bound by the National Privacy Finformation about you by various methods throug Residential Tenancies Act. We may disclose pe (approved and authorized by Just Real Estate) i information that we hold about you by contacting of	please complete this form ill then be in contact with y Principals. We may be collect hout the tenancy to enable to prisonal information about you in the course of our day to	n and fax, post or delive ou. We are an independe ting personal us to manage and maintain ou to the owner of the pro	r to our office. Either a ntly owned and operated in the premises as per the operty and to contractors
TENANTS SIGNATURE Repair Completed:	DATE Tenant/Invo	TIME	 E AM/PM