

# RELOCATION REALTY, INC. MAINTENANCE REQUEST

Office Use Only  
 Priority Code  
 1 2 3 4  
 Date received \_\_\_\_\_  
 By \_\_\_\_\_

PROPERTY \_\_\_\_\_  
 \_\_\_\_\_

RESIDENT \_\_\_\_\_

## DESCRIPTION OF PROBLEM

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## MAINTENANCE ISSUE

**HEAT AND AIR:**  
 \_\_\_\_\_

**APPLIANCE:**  
 \_\_\_\_\_

**PLUMBING:**  
 Toilet                       Shower/Tub  
 Hot Water Heater  
 Faucet \_\_\_\_\_  
 Leak \_\_\_\_\_

**ELECTRIC:**  
 Ceiling Fan                       Light Fixture  
 Switch                               Outlet  
 \_\_\_\_\_  
 \_\_\_\_\_

**OTHER**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

How does the maintenance person contact you?  
 Home \_\_\_\_\_ Office \_\_\_\_\_  
 Other \_\_\_\_\_ Fax \_\_\_\_\_

## OFFICIAL NOTICE

If you are unavailable during normal business hours within a reasonable period of time, or if the vendor cannot get in touch with you, we will supply the maintenance person a key to perform the work.

Should maintenance person discover reported item working properly or is due to Resident's misuse or abuse, Resident agrees to pay for such invoice.

X \_\_\_\_\_  
 Resident's Signature                      Date

**FAX TO 770-641-1609**



**RELOCATION REALTY, INC.**

A FULL SERVICE REAL ESTATE COMPANY

[www.rentalrelocation.com](http://www.rentalrelocation.com)

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