CONDUCT PREVENTATIVE INSPECTION? YES NO	
MAINTENANCE REQUEST DO NOT SEPARATE COPIES	CAMBRIDGE
	real estate services
PROPERTY NAME	PROPERTY # APARTMENT # CAMBRIDGE REAL ESTATE SERVICES
RESIDENTS	PHONE # 503 242379 DATE 1/17
EMAIL ADDRESS	
A-124	
MAINTENANCE REQUEST (DESCRIBE PROBLEM) Apartment Leaking	
	V
Please complete at the earliest possible opportunity	
☐ Please complete on, between OR	
Unless indicated immediately below, I hereby give Management and its contractors permission to enter my apartment at reasonable times, and even in my absence, to do the necessary repairs. This permission expires after 7 days unless the repairs are in progress and the management is making reasonable efforts to complete the repairs, in which event entry may be made until the repairs are complete.	
Please provide 24 hours notice prior to entry to complete the repairs requested; OR	
If practicable, enter by scheduling an appointment with the resident by calling Instructions to resident: To facilitate response to your maintenance request please observe the following: Do NOT put chemicals in	
clogged drains; do NOT leave pets or children unattended; make sure there is a clear passage for maintenance personnel; and please call immediately if there is any change in the service requested.	
Resident Signature	Date
OR - Service requested by telephone or e-mail; Resident provided verbal or electronic authorization to enter apartment on ALL 1 5+ between the hours of and	
By signing this request, the resident also agrees the maintenance technician may conduct a preventative maintenance inspection while in the apartment and, to the extent practical, address any necessaray repairs. If it is not possible to address the repairs while performing the repairs requested by the resident under this Maintenance Request, a notice of entry will be given for the additional repair work.	
If present, resident acknowledges the repair service request was responded to. Repairs appear to be complete to the best of my knowledge, and the work area was left in acceptable condition. Resident Signature SHN Q SMITH Date 18	
SERVICE SUMMARY (To be completed by responding maintenance technician)	
Verify all smoke detectors or smoke alarms present are in working order. Tamper Slicker in place. Evaluate apartment for evidence of moisture issues. Evaluate apartment for evidence of habitability issues. Total Pigsy'. I Almost gagged.	
MANAGER/MAINTENANCE PERSON'S RESPONSE:	
DATE SERVICE PROVIDED TVCSDAY Start Time 9AM Completion Time 5pm x	
Maintenance Technician Signature	
Pellsi? DYES & NO Type CAN'T REMEMBER	
☐ Maintenance: Check this box if you request a follow-up with Manager.	
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