

**TENANT REPAIRS/REQUEST FORM**

**Laing + Simmons Roseville/Lindfield**

Phone: 9413 3885 Fax: 9413 3997

Property address: \_\_\_\_\_

Tenant surname: \_\_\_\_\_ First name: \_\_\_\_\_

Phone (w) \_\_\_\_\_ (mob) \_\_\_\_\_ (h) \_\_\_\_\_ (email) \_\_\_\_\_

**REPAIRS/REQUEST REQUIRED: PLEASE BE SPECIFIC AND GIVE THE FULL DETAILS.**

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

If the problem is of an **EMERGENCY** nature, **PLEASE PHONE FIRST** and then confirm in writing

**Please circle the options which apply, regarding appliances and entry:**

If any of the following items need attention,

(a) Stove is gas / electric                      (b) Oven is gas / electric                      (c) Hot water is gas / electric

**To gain access:**

(a) Use agent's key and enter at the convenience of the tradesperson      YES      NO

(b) Phone me between \_\_\_\_\_ and \_\_\_\_\_ am / pm to make an appointment to enter      YES      NO

**TENANTS CONFIRMATION**

I / we hereby authorise your office and / or the repairers to enter the property as above in order to view or carry out the repairs.      YES              NO

It is a policy of our office that all repairs or complaints must be in writing and must be advised as soon as possible. In order for repairs / complaints to be attended to, please complete this form and fax, post or deliver to our office. Either a representative or our office or a tradesperson will then be in contact with you.

*We are an independently owned and operated business. We are bound by the National Privacy Principals. 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 of the property and to contractors (approved and authorized by Laing + Simmons) in the course of our day to day duties. You have the right to access personal information that we hold about you by contacting our privacy officer.*

**TENANTS SIGNATURE:** \_\_\_\_\_ **DATE** \_\_\_\_\_

Please print clearly and complete form in full so that we can solve the problem as soon as possible

**OFFICE USE ONLY:**

LANDLORD _____	LIMIT \$ _____	DATE ISSUED _____
REPAIRER _____	COST \$ _____	DATE COMPLETED _____
PROP MNGR _____	DATE PAID _____	LANDLORD NOTIFIED _____
FILE NOTES _____	_____	