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FORM 24A

TENANT MAINTENANCE REQUEST FORM

TENANT INSTRUCTIONS

All general maintenance must be reported to our office in writing. In order for a repair to be attended to, please complete this form and fax, post, email or deliver to our office. In the event of an emergency repair, contact our office immediately! Once we have received the request, either our office or a tradesperson will contact you, if deemed necessary.

Mailing Address: P.O. Box 1070,
 Oxenford, Qld 4210

Fax: 07 5529 9500

Email: maintenance@qps2000.com

Date: _____

Time: _____

Address: _____

Concern: _____

ACCESS DETAILS

Tenant Name(s): _____

Phone Home: _____ Work: _____ Mobile: _____

Access to property: Take office key Tenant will be home

Tenant preferred time and date: _____ Tenant authorises entry Yes

I hereby authorise your office and/or the tradespeople to enter the property with the keys in order to carry out the repair or view the repair.

Signed _____

If the repair relates to any of the following appliances, please list the make and model

Stove _____

Washing Machine _____

Oven _____

Microwave _____

Dryer _____

Fridge _____

Dishwasher _____

Air Conditioning _____

Hot Water Service _____

Gas Electric

Office Use Only:

Rec date / /

Initial Tenant Contact; date / /

Seven day follow-up Contact; date / /

Date Completed / /