Rental Housing Association of WA		MAINTENANCE REQUEST NOTICE
Building Name:		
Phone #:		
SERVICE REQUESTED - Describ	e issue/ concern and special instruc	tions.
Check one of the following:		
I authorize the Owner, Agent, a	and/or maintenance personnel to en	ter the rental premises to perform the work identified above.
I request that I be present duri	ng any entry to the rental premises.	Please call me to schedule the work. I recognize that this request
may delay completion of the re	epairs.	
-		repair which is not required by the Residential Landlord Tenant Act. I als nises and I agree to cooperate with scheduling these entries.
Resident:	Signature:	Date:
		Date:
		Date:
		Date:

Work Performed:

Address: ___

Comments:

Completed by: _____ Date Completed: _____ Time Completed: ____

Date Request Received: ______ If Verbal, taken by: _____