

Tenant Name

Phone: 02 8860 6521

Level 5, Nexus Building, 4 Columbia Court, Baulkham Hills NSW 2153 Email: info@lexiconproperty.com.au

Maintenance request form

| Address | s of property: | Date: |
|---|---|---|
| | | |
| Tenant | name(s): | |
| | | |
| Mobile | (1): | Mobile (2): |
| | | |
| Home: | | Work: |
| | | |
| Email: | | |
| The following repair and/or maintenance items require attention: | | |
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| Please note: If repairs and/or maintenance are required for an appliance, wherever possible, please advise whether it is gas or electric and provide the make and model number. This will speed up the process of organising the repair. | | |
| | I hereby authorise Lexicon Property Agents, its employees and contractors to use the keys to the above property held by Lexicon Property Agents to gain access to, investigate and if applicable, carry out the repairs at the above property, without the need for further notice to me. | |
| | by Lexicon Property Agents and undertake to pers Lexicon Property Agents' contractors. I freely ackn | oloyees or contractors to use the keys to the above property held onally provide access to the property at a time to be advised by owledge that if I make such arrangements and then fail to provide r any charges made by Lexicon Property Agents' contractors for |
| | I acknowledge that my contact information may be Agents or the owner of the property to facilitate con | provided to either the contractors engaged by Lexicon Property ntact in order to carry out the repairs. |
| | | |

Tenant Signature

Date