

MAINTENANCE REQUEST FORM

can be faxed or mailed to:

Realty One Property Management, Inc., • 1745 Shea Center Drive Ste 400 • Highlands Ranch, CO 80129
303.834.0311 • Fax 303.932.0756

Date Received: _____ INVOICE# _____
Time Received: _____
Received By: _____
Unit Address: _____
Owner/Occupant: _____
Phone: Home _____ Work: _____
Mailing Address: _____

Concern:

- | | | | |
|---|--|-------------------------------------|---|
| <input type="checkbox"/> Animal | <input type="checkbox"/> Antenna | <input type="checkbox"/> Asphalt | <input type="checkbox"/> Building Maintenance |
| <input type="checkbox"/> Building Repairs | <input type="checkbox"/> Carports | <input type="checkbox"/> Clubhouse | <input type="checkbox"/> Concrete |
| <input type="checkbox"/> Fence | <input type="checkbox"/> Grounds maintenance | <input type="checkbox"/> Gutters | <input type="checkbox"/> Ice |
| <input type="checkbox"/> Landscape | <input type="checkbox"/> Lights Out | <input type="checkbox"/> Paint | <input type="checkbox"/> Parking |
| <input type="checkbox"/> Pest Control | <input type="checkbox"/> Plants | <input type="checkbox"/> Roof Leak | <input type="checkbox"/> Sidewalk Repair |
| <input type="checkbox"/> Snow Removal | <input type="checkbox"/> Sprinkler | <input type="checkbox"/> Trash Cans | <input type="checkbox"/> Water Shut-off |
| <input type="checkbox"/> Weeds | <input type="checkbox"/> Other: _____ | | |

Description of Problem: _____

Date Handled By Manager: _____
Name of Contractor/Maintenance Co _____
Expected Date of Completion: _____
Date Work Completed by Cont/Maint: _____
Amount Homeowners Responsibility: _____
Total Cost of Work: _____

Comments: _____

Faxed/Emailed to Contractor/Maintenance Co. _____ Or Mailed _____

By: _____ Date: _____ Time: _____