

RESIDENT'S SERVICE REQUEST

Please Do Not Use This Form for Emergency Service Requests – In Case of Emergency, Please Contact: Fortino Madrid 650.477.4294

TO BE COMPLETED BY RESIDENT

Resident Name: _____ Cell Phone _____ Work Phone: _____ Home Phone: _____

Address: _____

Service(s) Requested: _____

Animal(s) in the Unit? Yes No If yes, animals in the unit must be restrained or under Resident's direct control so as not to interfere with Landlord's ability to complete the Service Request. Failure to do so may result in the Service Request not being completed.

Please check the following additional items while you are in the unit: Smoke Detector CO Detector (if present) Kitchen Plumbing Bathroom Plumbing Other
If "Other," explain: _____

Signed: _____ Date: _____ Time: _____
(Resident)

TO BE COMPLETED BY LANDLORD

Received By: _____ Date: _____ Time: _____ Resident's request was submitted in person in writing and is attached
 by phone other If "Other," specify (e.g., text, email) _____

Resident's Request(s)	Action Taken	Follow-Up Needed? If yes, explain

Work Completed by: _____ Date Completed: _____ Charge Cost to Resident: Yes No. If yes, amount: \$ _____

Reason For Charge: _____

TO BE COMPLETED BY RESIDENT

Resident(s) certifies that service request is correct except as follows _____

Work was completed to my satisfaction Yes No If "no," explain: _____

Signed: _____ Date: _____



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