



CAMBRIDGE KIWANIS HOUSING

Unit A – 350 Linden Drive
Cambridge, ON N3H 5N7
(519) 650-5437

Maintenance Work Request

Please print clearly

Name:		Date:
Unit Number:	Building:	Phone:

- I authorize CKH staff/Contractor to enter my unit, **without 24 hour notice**, in order to inspect the problem and/or carry out the work.
- I request 24 hour notice before CKH staff/Contractor enter my unit and acknowledge that this may delay repairs

Tenant's Signature: _____

DESCRIPTION OF PROBLEM: Please list just one request per work order; clearly specify location & problem

List any/all types of pets present in unit: _____

**NOTE: Pets must be caged or in a separate room, away from work area.
Failure to comply may delay work being completed.**

FOR OFFICE USE ONLY

Superintendent's Assessment/Completion of Work

Carried out: By:	Additional Information re Repairs Needs & possible equipment/materials needed
Date:	

Work Completed/Work Order Closed:

Charge to CKH	Charge to Tenant
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