**Request for Routine Maintenance Form**
Tenant to complete and submit this form to the agency



Name of Agency: Deasy & Doolan Real Estate T/A Professionals Emu Park
Agency Address: Shop 1/21 Pattison Street, Emu Park Q 4710
Phone Number: (07) 4939 6411
Fax Number: (07) 4939 6926
Email: admin@professionalsemupark.com.au
Please provide the details of the maintenance required, and any further information deemed relevant to this matter.

**Name of tenant/s:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Property Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Contact Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I/We the tenant/s, upon signing this form, consent to the passing of my/our name and contact details onto trades people/contractors for the sole purpose of gaining access to the property in order to complete any required maintenance and or quotes as per the lessor instructions.

I/We Consent Urgent
 Do not consent Non Urgent

to trades people/contractors gaining entry to the property by using keys supplied by the office only after I/We have been notified of a date and entry time. Alternative arrangements via appointment during business hours can be otherwise arranged with the trades people direct.

I/We understand that the trades people/contractors and your agency are bound by the privacy act 1988, and acknowledge that upon request a privacy policy will be supplied.

I/We also acknowledge that upon the signing of this form, if the work attended to is found to be caused by the tenant/s or the tenant/s have not taken enough care when inspecting the problem, the tenant/s may then be accountable for the expenses incurred. e.g. If the problem is found to be the tenants TV or no booster pack is present, the tenant/s could be responsible for the call out fee.

..………………………………………………………… ………………………………………………………… Signature of tenant/s Date