

Request for Routine Maintenance Form

Tenant to complete and submit this form to the agency

	AGENCY					٦.	
	NAME OF AGENCY: Rmac Real Estate F	OTV I TN	PROPERTY MANAGER: Rentals HB				
	ADDRESS: 3/4 Queens Road				Rentals HD		
	3/4 Que	ens Road					
	SUBURB: Scarnes:				E: QLD POSTCOI	DE: 4655	
	PHONE: 07 4334 0001	MOBILE:	FAX:	EMAIL: rentalshb@remax.com.au			
	07 4334 0001			Teritaishb@remax.com.au			
	TENANTS						
	PROPERTY ADDRESS	S:					
	SUBURE	3:			STATE:	POSTCODE:	
	NAME OF TENANT/S:						
	PHONE:	MOBILE:	FAX:	EMAIL:			
	PHONE:	MOBILE:	FAX:	EMAIL:			
	PHONE:	MOBILE:	FAX:	EMAIL:			
	PHONE:	MOBILE:	FAX:	EMAIL:			
	Please provide the	Please provide the complete details of the maintenance required and any further information deemed relevant to this matter.					
	I/we the Tenant/s, upon signing this form, consent to the passing of my/our name and contact details onto tradespeople/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 ☐ Do not consent ← Please select one						
	To tradespeople/cont	o tradespeople/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 tradesperson direct.						
	SIGNATURES	SIGNATURES					
			Date:			Date:	
	Tenant/s:			Tenant/s:			
	Towns and		Date:	T		Date:	
	Tenant/s:		-	Tenant/s:			

INITIALS