



LS Property Management
8345 Sargent Ave., Suite D
Whittier CA 90605
Guidance You Can Trust!

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MAINTENANCE AND REPAIR REQUEST

Resident's Name: _____ Date: _____

Address: _____ Apt No. _____

Phone (Home): _____ Phone (Work): _____ Pager: _____

Request: _____

Comments (including best time to make repairs): _____

I authorize entry into my unit to perform the maintenance or repair requested above, in my absence, unless stated otherwise above.

 Resident Signature

FOR MANAGEMENT USE ONLY

Date Received: _____ Mailed In ___ Called In ___ Verbal ___ Note ___ Inspection Report ___

Date work ordered: _____ Vendor: _____

Work Done: _____

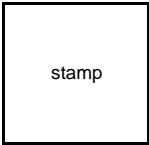
Unable to complete because: _____

Comments: _____

Completed By _____ Date _____

Resident Signature _____ Date _____

From: _____



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Fold

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