GLEN GARDENS
MAINTENANCE WORK ORDER

Apt.#_____

Date:_____20__

Requested by:_____

Telephone# _____

_____Permission to enter

_____Emergency

_____Appliance

_____Electrical

_____Plumbing /Drainage

_____General Repair

Description:

1_____

_____

_____

_____

2_____

_____

_____

3_____

_____

_____

Date Completed: 1_____ 2_____ 3_____

Office Use: Maintenance Code:_____

Materials used

_____

_____

Time Taken_____(hrs) Should member pay no /yes $_____

Completion Date._____ Completed by_____

Maintenance Remarks:_____

_____

_____