



1 Sunshine Blvd Broadbeach Waters Qld 4218

Phone (07) 5592 1466

Fax: (07) 5570 1248

Date:.....

**REPAIR ADVICE**

In order for a repair to be attended to, please complete the repair advice and fax, post of deliver to our office.

TENANT: .....

ADDRESS:.....

PHONE: WORK:.....

HOME:.....

MOBILE:.....

FAX:.....

It is a policy of our office that all repairs must be in writing and must be advised as soon as possible.

Details of repair (Please Print Clearly)

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In the event of the following items requiring attention, please advise by deleting which is not applicable.

STOVE            Gas    or    Electric  
 OVEN            Gas    or    Electric  
 HOT WATER    Gas    or    Electric

<b>JOB GIVEN TO DATE</b>
<b>Office Use Only:</b>
Tradesman:
Lessor:
Other:

TENANT CONFIRMATION

**PLEASE CIRCLE**

I/We hereby authorise your office and or the repairers to enter the property with the keys in order to carry out the repair or view the repair.

**YES**

Entry Authorised

**NO**

Phone First

Please Note: You will **NOT** be contacted first if you circle **YES**. Tradesmen will collect the spare keys from our office.

Signed by Tenant/s:.....

Date:.....