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FORM Housing Maintenance / Work Request Council Rental Accommodation

NOTE: Failure to comp	lete all questions	will delay processing t	he work.
Request date			
Tenant's name/s			
Contact number			
Address of residence where work is to be carried out			
	□ Jundah	☐ Stonehenge	☐ Windorah
URGENCY OF WORK:	□ Safety	☐ Functionality	☐ Cosmetic only
Type of Work or Repair ☐ Electrical / air conditioners		Description of work or repair requested	
□ Walls / fixtures			
□ Doors / windows /	fly screens		
□ Flooring			
☐ Plumbing / pipes / v	water		
□ Painting			
☐ Building structure / roof / stumps			
☐ Fencing / grounds / driveway			
☐ Other, please specify			
Has this defect been noted on any previous inspection report? (please tick one) ☐ Yes ☐ No			
Reported by Date			
Office use only – Form File	-		
Received by	Date	e Time	Doc ID No
Forwarded to Housing Officer		for attention on	
Works completed by			
Officer comments (person			