



MAINTENANCE SERVICE REQUEST --- HOA COMMON AREAS ONLY

Date: _____

Homeowner's Name: _____

Address: _____ Unit #: _____

Phone: _____ Email: _____

EXPLANATION OF REQUEST (PLEASE INCLUDE LOCATION OF AREA TO BE ADDRESSED)

OFFICE USE ONLY

Date Received: _____

Action Taken: _____

Does Action Require Board Approval: _____ Next Board Meeting Date: _____

Date Completed: _____ Mgr. Initials: _____