

TAGGART REALTY MANAGEMENT INC.

REQUEST FOR IN SUITE REPAIRS OR COMPLAINT FORM

Name:		Date:
Unit No.:	Building:	Urgent: ___ Yes ___ No
Permission to Enter: ___ Yes ___ No	Special Lock: ___ Yes ___ No	Phone No.: Bus. Res.

Repairs Required / Complaint

TO: BUILDING SUPERINTENDENT

I wish to have the following maintenance attended to and I hereby authorize Taggart Realty Management Inc. to enter my unit. Should it be necessary to use a service agency other than Taggart or should more than one visit be required I also signify my consent.

Signature of Resident _____

Date issued:	Date Completed:	Tenant initial
--------------	-----------------	----------------

Signature of Building Staff _____

ADVICE TO RESIDENT

Your request for service _____ has been completed / _____ has not been completed.

Details: _____

For further comments / requests call _____ at _____

Date: _____ Signature of Building Staff _____