## SERVICE REQUEST PROCEDURE

Project Name: Live Oak Apartments	
Resident Name:	
Apartment Number:	Date:
I have read the Project Rental /Lease Agreement given to me at time of move-in:	
I am aware that I must advise the Project office when maintenance or repair work needs to be performed in my apartment. I am aware that this can be done by one of the following methods:	
1. By going to the Project Office during normal wo	orking hours, and completing a "Service Request".
2. If I cannot come to the Project Office in person hours to put in my "Service Request".	, I will call the Project Office during normal business
3. In emergency situations, when the Project Office telephone number and leave a message with pager system, etc.	ce is closed, I will call the Project Office the answering service, Standby/Backup personnel,
4. All non-emergency requests for repairs will be	handled during normal Project business hours.
I am aware that I am not charged for normal wear and tear repairs/maintenance performed in my apartment. However, I will be held responsible for any and all damages/repairs resulting from my negligent actions or those of my guests.	
I am aware that Maintenance Staff are paid by Management and <u>SHOULD NOT</u> receive any form of payment from me for the necessary maintenance they perform in my apartment.	
I am aware that the Project Maintenance staff is not available to perform personal services for me. I am also aware that I must hire my own repairperson to repair my TV, move furniture, etc. In addition, when I pay for a utility I must call that utility company to repair that utility (cable, telephone or gas/electricity).	
I am aware that, if I do not report to the Project Office repair work that needs to be performed in my apartment, I may be charged for damage incurred as a result of my negligence.	
Owner/Agent	Date
Signature	Date
Signature	Date

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