



Housing

REQUEST FOR MAINTENANCE & REPAIRS FORM

Street Address: _____

I am requesting the following maintenance and/or repair for the unit noted above:

REQUEST	INTERNAL USE ONLY	
	DATE COMPLETED	TIME

I confirm that these repairs are a result of normal wear and tear and are not a result of damage or willful neglect on the party of anyone in my household or my guest(s). I understand the Splatsin Housing Department will contact me to arrange for an inspection to confirm the nature and eligibility of the required maintenance and/or repairs. I can be reached at the phone number provided below.

Tenant Name: _____

Signature: _____

Daytime Phone: _____

Cell Phone: _____

Application Received Date: _____

Work Order Completion Date: _____





Housing

MATERIAL LIST		
QUANTITY	ITEM	COST

Submit a completed application and required documentation (proof of income) in-person, by email to housing_clerk@splatsin.ca, or by mail to: 5775 Old Vernon Rd., PO BOX 545, Enderby, B.C., V0E 1V0. For assistance, call (250) 833-6496.

