Maintenance Request Form

Mail to: 4917 Evergreen Way #292
Everett, WA 98203

Fax: 425/259-6490

PREFERRED
PROPERTY MANAGEMENT, INC.
COMMERCIAL & RESIDENTIAL

Date: _____ **Written By:** _____

Location: _____ **Unit#** _____

_____

Name: _____

Home Phone: _____ **Work/Cell:** _____

Permission to enter: YES ☐ NO ☐ CALL FIRST ☐

Pets: YES ☐ NO ☐

Description of Repairs Needed:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

----------Office Use Only----------

Assigned to: _____ **Date:** ____/____/_____

Insurance: Yes____ **No**____ **Work Completed: Yes**____ **No** ____

_____
_____

Time Spent: _____ **Material:** _____

TOTAL: $_____ **Owner Billed: Yes** ____ **No** ____ **Date:** _____