

Royal City Housing Co-op Work Order and Repair Request Form

Name: _____

Unit No: _____

Phone No: _____

Date: _____

Description of problem:
(If this is an emergency* call an Emergency Contact Person)

Location of problem (room): (ie kitchen)

Describe the problem: (ie sink slow to drain)

Permission to enter unit when not home : YES

(Note: Work may take up to 10-days or more to schedule without permission to enter and if parts need to be ordered)

Member's Signature X _____

For Office Use Only:

| | |
|---|--------------------------------|
| <i>Date Received:</i> | <i>Supplies Needed:</i> |
| <i>Date Started:</i> | <i>Equipment/Tools Needed:</i> |
| <i>Date Completed:</i> | <i>Special Notes:</i> |
| <i>No. of people needed for repair:</i> | <i>Member Cost?</i> |
| <i>Work Completed by:</i> | <i>Co-op Cost?</i> |

*** An emergency is:**

- loss of heat, electricity or water throughout all of your unit
- major roof or wall leaks
- plumbing failure where water is overflowing on the floor or walls (not a dripping tap or blocked toilet)
- complete breakdown of appliance
- broken window

NOTE: Never use Drain-o or similar products in our drains; it corrodes the pipes and causes serious damage

Emergencies involving fire, personal safety, violence, serious illness, break-ins, vandalism etc **CALL 911**