

West Hills Co-op Request for Maintenance / Work Order Form

PART 1: To be filled out by Member and/or Unit Inspector requesting maintenance.

Member's Name: _____ Unit #: _____

Phone Number _____ Date Submitted: _____

Best time to be reached: _____

Unit Inspector's Name & Phone Number: _____

New Request? Yes No

Description of Problem(s):

PART 2: To be filled out by Maintenance Chairperson and Maintenance Worker.

Assigned to: _____ Date: _____ Urgent Normal

Recommendations: _____

Materials/Parts Needed _____

Description of Work Completed: _____

Completed by: _____ Date: _____

Member's Signature once work is complete _____ Date: _____

Maintenance Chairperson Approval _____ Date: _____

Board Approval (if applicable) _____ Date: _____

CLEAR FORM