

STRATA MAINTENANCE REQUEST FORM

Please print and fax the Request Form to (02) 9599-6466.

STRATA PLAN NO.:

ADDRESS OF PREMISES:

NAME OF OCCUPANT/S:

Contact:

NAME OF OWNER/AGENT (If Any):

Contact:

DESCRIPTION OF REPAIRS REQUIRED:

RENTAL MAINTENANCE REQUEST FORM

DESCRIPTION OF REPAIRS REQUIRED (Cont.):

SIGNATURE:

NAME:

DATE: