

LAC DU FLAMBEAU CHIPPEWA HOUSING AUTHORITY

WORK ORDER ~ SERVICE REQUEST FORM

Please explain the problem and service you need as clearly as possible. This will help us provide better service and to ensure that we fully understand your request.

In some cases a replacement part may not be immediately available and will need to be ordered.

Today's Date: _____ Time: _____ AM / PM

Tenant Name: _____

Unit Address: _____

Home/Cell Contact Number: _____

CHA Permission to Enter _____ Yes -OR- _____ No (Notify First)

Please describe in best detail, description of work needed:

***Every effort will be made to satisfy your request as soon as possible. Thank You! ***

Tenant Signature: _____ Date: _____

Staff Signature: _____ Date: _____

Date Submitted to Maintenance: _____ Time: _____

CC: MAINTENANCE FILE
OCCUPANCY SPECIALIST