

MIMICO CO-OPERATIVE HOMES INCORPORATED

MAINTENANCE WORK ORDER FORM

THIS PORTION TO BE COMPLETED BY MEMBER(S) ONLY

UNIT: _____

NAME: _____

HOME PHONE # _____

DATE: _____

WORK PHONE # _____

Any Pets? None Dog Cat

I understand that by filling out and signing this report, I give permission to the Co-op to enter my unit and make the necessary repairs if they can be repaired. If not signed please contact me prior to entering my unit.

Members Signature

DESCRIPTION OF WORK TO BE COMPLETED

Dear Member(s),

Please be aware that I entered your today in order to complete the repairs that you have requested.

Plumbing

Drywall

Electrical

Closets

Carpentry

Other _____

Staff Signature

Date