Maintenance & Repair Request

Date:	Property Name:		Highland Manor Apartments	
Resident Name(s):				
Unit:	Street Address: _	1205 W. F	ghland Ave. Hermiston, OR 97838	
Phone Number:				
	TYPE OF MAIN	ITENANCE (OR REPAIR NEEDED:	
Heating	□ A	ppliance	☐ Doors/Windows	
☐ Plumbing ☐ Elec		Electric	Other	
Exact nature of pro	blem and cause (if	known). Be	specific!	
Tenant recognizes the premises without n	nat this written reque	st authorizes e times for	the landlord or the landlord's agents to enter the a minimum of seven (7) days or until the s. In the event the repairs/maintenance are in	
	tenants hereby auth		are making reasonable effort to complete the at reasonable times in excess of seven days until	
	S	ignature of Te	enant	
	MA	NAGER'S R	ESPONSE	
•	•		eduled to begin on	
			rd or the landlord's agents to enter the	
premises to comple	ete the work			
	ents will enter only maintenance are co		d will have access to the premises until the	
Signature of Landlord or Landlord's Agent			 Date	