

600 Park Avenue Bremerton WA 98337 (p) 360-479-3694 (f) 360-616-2927 www.bremertonhousing.org

## WORK ORDER REQUEST

Date/Time Received by PM\_\_\_\_\_

Property\_\_\_\_\_

Resident's Name \_\_\_\_\_ Phone #:\_\_\_\_\_ Unit Address/Apt #:\_\_\_\_\_

FIIONE #.											
PLEASE CIRCLE ABOVE THE PROBLEM AREA											
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Bed	Blinds	Bugs	Door	Door Locks	Electrical Outlet	Faucet	Flooring	Fridge	Heat	Kitchen Cabinet	Leak
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	e Con	0			C S	(Million)		J			
Light	Light Switch	Peep Hole	Picture	Range Hood	Sink	Smoke Alarm	Stove	Toilet	Tub	Vent	Window

Describe Nature of Request:

Are there any pets in your unit? If so, what type? Dog/Cat \_\_\_\_\_ Does the Technician have permission to enter your unit in your absence? \_\_\_\_\_

## Resident Signature authorizing this work to be done as above:

	Date:				
Maintenance Notes: Date Complete: Description of parts used/work done	Time In/Out:				
Tenant Caused Damage: (Circle One) Yes or	No Cost + Labor \$				



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If you need to request a reasonable accommodation, contact the BHA Section 504 Coordinator at (360) 616-7111. Telecommunication for the hearing impaired TRS dial 7-1-1.