William Lyon MacKenzie Co-operative Homes

MAINTENANCE WORK ORDER

Co-op Office (905) 731-4181

Member's Name: _____ Phone (Home): _____

Unit: _____ □ Emergency □ Routine Phone (Work): _____

Maintenance Request

Requested by: □ Member □ Staff □ On-Call □ Routine

Permission to Enter: □ Yes □ Call First □ Dog □ One day's written notice

Description	Date of Call	Action Taken	Date of Action