

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