FOR OFFICE	E USE ONLY		
Date Received :		MAINTENANCE	
Work Order Number :		REQUEST FORM	Carpathia Housing Co-op Ltd.
	URGENT/EMERGEN	VCY Date:	
Unit #:		DAYTIME CONTAC	T INFORMATION:
Member:		Phone #:	
-		E-Mail:	
Permis	ssion to Enter:	<u>Pets in Unit</u>	YES 🗖 NO 🗖
* YES 🗖	NO 🗖	* DOG LOCKED AWAY? ot checked, Then answers are YES!	YES 🗖 NO 🗖
(r from pet(s) not locked away are the responsibility of	<u>the member.)</u>
DATE/DAYS AND TIME MEMBER IS AVAILABLE FOR MAINTENANCE TO ATTEND UNIT.			
DATE / DAYS:			
TIMES: MORNING (9:00am to NOON) AFTERNOON (1:00am to 5:00pm)			
WORK TO BE DONE:			
I understand that work orders are prioritized by: emergency, permission to enter, then by appointment only (no permission given) and that if permission is not given this will result in a delay in work being performed.			
Please complete form	Member's Signature	ail Box at office <i>OR</i> Fax Back to: (204) 488-9308	_

Unit 7 – 394 Carpathia Road • Winnipeg • Manitoba R3N 1Y4 • Facsimile (204) 488-9308 • PHONE (204) 489-1069 • <u>www.theworldonline.com/co-op/carpathia/</u> • <u>carpathiaco-op@mts.net</u> •