



MAINTENANCE / REPAIR NOTICE

305

DATE AND TIME SUBMITTED _____

RESIDENT(S) _____ PET INSIDE: YES NO
et al (and all others)

PROPERTY ADDRESS: _____ UNIT # _____

CITY: _____ STATE _____ ZIP _____

TELEPHONE DAY _____ TELEPHONE HOME _____

MAINTENANCE OR REPAIR NEEDED

- HEATING APPLIANCE DOORS / WINDOWS
- PLUMBING ELECTRIC OTHER _____

Exact nature of problem and cause, (if known) be **SPECIFIC!**

Resident recognizes that this written request authorizes the landlord or the landlord's agents to enter the premises without notice at reasonable times for a minimum of seven (7) days or until the repairs/maintenance are completed, whichever is less. In the event repairs/maintenance are in progress and the landlord is making reasonable effort to complete the repairs/maintenance, resident hereby authorizes entry at reasonable times in excess of seven days until such repairs/ maintenance are completed. ORS 90.322(c).

RESIDENT'S SIGNATURE _____ DATE _____

OFFICE CONFIRMATION AND LOG OF ACTIVITY

- Resident written request Resident verbal request Staff inspection report
- Maintenance to be completed by _____ Documentation: Notes, dates and times, of all activities regarding this request.
- Owner notification or approval necessary _____
- Approval date/time: _____
- Assigned to: _____
- Date/Time _____
- Subcontractor necessary: _____
- Assigned to: _____
- Date/Time: _____
- Follow up report to Resident _____

MAINTENANCE STAFF REPORT OF ACTIVITY

- Repaired temporarily. Future follow up: _____
- Parts on order Substitute or alternative provided: _____
- Cause of deficiency: Ordinary wear & tear Resident misuse Other _____
- Chargeable to: Resident for misuse Management Owner Amount: \$ _____
- Work considered completed as of: _____
- RESIDENT'S SIGNATURE _____ DATE _____

DISTRIBUTION: ORIGINAL - LANDLORD • 2ND COPY - ON SITE • 3RD COPY - RESIDENT

LAPRAY PROPERTIES, LLC
laprayproperties.com

McMinnville: PO Box 1726; McMinnville, OR 97128; 503.472.4647; FAX 503.434.2850
Salem/Corvallis: PO Box 5060; Salem, OR 97304; 503.990.6287; FAX 503.967.6781



Form 305 © 1/04 OLSA NOT TO BE REPRODUCED WITHOUT WRITTEN PERMISSION