Algoma District Services Administration Board
Conseil d'administration des services du district d'Algoma

Tenant Request for Maintenance Form

Tenant Name: _____ Unit Address: _____

Contact or Alternate Contact Phone Number: _____

Maintenance Request:

Please provide repair/maintenance request details in the space below. If applicable, attach photos.

☐ Previously Requested? Date _____

Do you have a pet?

Yes _____ **No**_____

Pets must be contained and/or leashed during repairs.

By signing this form, you authorize:

1. The ADSAB to release your phone number to a Licensed Contractor in order to make repair arrangements.

2. An ADSAB staff or Licensed Contract to enter your unit within **72 hours** of this request in order to conduct this repair. If repair arrangements cannot be made within 72 hours of this request, a 24-Hour Notice of Entry will be provided to you prior to the day of repair.

3. **You are required to clean the immediate area of the maintenance repair you're requesting.**

Tenant Signature: _____ **Date**: _____

ADSAB Staff: _____ Date & Time Received: _____

Submit in person to the Custodian/Contact Tenant or the local ADSAB Office

Or

Attention: Maintenance

Algoma District Services Administration Board

June 2025

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