

MONTEBELLO CONDOMINIUM UNIT OWNERS ASSOCIATION

IN-UNIT SERVICE FORM

Date: _____

Time: _____

THERE IS A MINIMUM CHARGE OF \$25 PER HALF MAN/HOUR (plus parts) FOR ALL REGULAR SERVICE REQUESTS

THERE IS A MINIMUM CHARGE OF \$50 PER MAN/HOUR (plus parts) FOR ALL EMERGENCY SERVICE REQUESTS (4:00 P.M. TO 8:00 A.M.), WEEKENDS AND HOLIDAYS

ALL REQUESTS MUST BE MADE IN WRITING

ALL RENTAL UNITS NEED LANDLORD AUTHORIZATION BEFORE WORK CAN BE SCHEDULED

A. Resident Information:

1. Resident's Name _____ Phone #: _____ Bldg-Unit #: _____

2. Description of In-Unit Service Being Requested:

The routine work and services of the Association shall take priority over an individual Unit Owner's request for service under this program, for this reason we are not able to schedule specific dates and times for appointments.

3. Was request previously made? ____ Yes ____ No If yes, enter date: _____

B. Association Office Information:

4. Assigned to: _____ Date: _____ Time: _____ By: _____

5. Service Completed Date: _____ Time: _____ By: _____

6. Comments: _____

7. Charge to Unit: ____ Yes ____ No If no, list billing address: _____

8. Material Description	Materials \$	Labor Hours	Labor \$	TOTAL
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
TOTALS	_____	_____	_____	_____

Resident's Signature _____ Date _____

This Form Authorizes Management to Perform This Service