Maintenance Service Request

Date/Time Submitt	red:					
_					Foundation	Partners, LLC
Name:					4290 Bells Ferry Rd	. Suite 106-90
Phone #/ email					Kennes	aw, GA 30102
Address:					Phone	e: 678-388-9235
State/zip					Fax	:: 678-388-9867
		documents to determine your nay incur for items identified in y			□ yes □ n	o
Are you, your gue (If yes, please des		oerty in immenent danger? Or is	s the property uninha	bitable?	yes n	o
Describe the service	being request	ted. Please be clear and concise				
	•	ou believe would most likely serv		answer the question		election.
·	J	de 🗌 problem outside Ha	Į	r off at the meter?	yes no	
☐ Electrical ☐	problem insid	de 🗌 problem outside Ha	ve you shut the break	ker off?	yes no	
☐ Carpenter ☐	problem insid	de 🔲 problem outside 🗌	Appliance tech.	Landscaper	Locksmith Roofer	Painter
Are there any circui	mstance or pr	ior events which we should be	aware of?	yes 🗌 no		
If yes, please explair	·					
call us immediately the opportunity to	at (404)317-1 process your	intenance request as promptly of 646 after you have faxed your ro non-urgent needs during regula nfirm our receipt of your reques	equest to 678-388-98 ar business hours. If y	867. Please respect ou have not receive	our relationship by af ed a call from us with	fording us
Requesting Tenants	Signature:		Property Manage Signature:	ers		
Tenants Acknowle	- 1		Date/Time			