3 MONTHS MAINTENANCE/ INVESTIGATION

Client's Name .....Job No.....

Property Address.....

Telephone Number – Home .....Work.....Mobile.....

Email Address.....

Inspections and work will be carried out Monday – Friday Between 8am – 4pm

LIST ITEMS	ACTION BY

MAINTENANCE AUTHORISED OWNER SIGN.....DATE.....

MIRVAC MAINTENANCE/SITE MANAGER SIGN.....DATE.....

MAINTENANCE COMPLETED OWNER SIGN.....DATE.....

EMAIL: pcnsw@mirvac.com **Phone: (02) 9080 8000**

RETURN TO: **MIRVAC HOMES**
PO Box 159
HOXTON PARK NSW 2171