

TENANT REPAIR REQUEST

NOTE: This form is to be filled out by the Tenant and given to the Landlord so that repairs are completed before inspection by the Sonoma County Housing Authority.

To: (Landlord's name and address)

Date: _____

REPAIR REQUEST

Dear Property Owner/Manager:

This is to notify you of the following item(s) which require your prompt attention at:

(Tenant's address)

1. _____
2. _____
3. _____
4. _____
5. _____

Sincerely,

(Tenant's name)

Please provide a copy of this request to:
Sonoma County Housing Authority
141 Stony Circle, Suite 210,
Santa Rosa, CA 95401

Keep a copy of this request for your records.