Building & Grounds Maintenance Request

	Date:	-	
Name:	Unit #	Phone:	
Detailed description of reques	st or problem:		
Location:			
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Manage	er or Maintenance Supe	ervisor Use Only	
Inspected B <del>y</del> :	Date	:	
Comments:			
Action Taken B <del>y</del> :	Date	::	
Comment/Status Report			
Final Inspection By:	Date:		
Approved/Not Approved/ Con	nments:		

Office: 808-235-4416

Email: admin@mkmarina.org