



PROPERTY MANAGEMENT PROGRAM

MAINTENANCE & REPAIR REQUEST FORM

For all requests, please submit to Ryan McCallen at rmccallen@danielshealth.com.

Tenants will need to submit three quotes, scope, time frame for completion, and any relevant pictures for work to be done. For emergencies, see below.

Property Address

Company Name

Full Name

First Name Last Name

E-mail

example@example.com

Phone Number

Please enter details of requested work and/or description of problem.

How long has this issue occurred and who identified it?

For all medical and fire emergencies, please call 911.

For all other emergencies, please contact the prime vendor by trade. As well, please follow up with Ryan McCallen at (516) 865-0033 as soon as available.