

PHOA Ref #: \_\_\_\_\_

# Maintenance Request

## Woodridge Center Patio Home Owners Association

TO: Woodridge Center Patio Home Owners Association  
c/o Village IV Organization  
6955 Woodridge Drive  
Woodridge, IL 60517

Date: \_\_\_\_\_

FROM: Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred Contact Method:     Call     Text     Email

### Description of Requested Work:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Reason for Request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

### For Board Use Only

Date Received: \_\_\_\_\_

Date of Response: \_\_\_\_\_

Date of Property Inspection If Required: \_\_\_\_\_

Comments / Concerns: \_\_\_\_\_  
\_\_\_\_\_