

**CROWN PROPERTY SALES**

**REPAIR ADVICE**

**COFFS HARBOUR OFFICE**

22 Moonee Street

Ph: 6652 2266

Fax: 6651 8611

**WOOLGOOLGA OFFICE**

1/58 Beach Street

Ph: 6654 8666

Fax: 6654 8600

**URUNGA OFFICE**

17 Bonville Street

Ph: 6655 6616

Fax: 6655 6622

**NAMBUCCA OFFICE**

1/41 Bowra Street

Ph: 6568 5766

Fax: 6568 5711

**Tenant:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone (H):** \_\_\_\_\_ **(W):** \_\_\_\_\_ **(M):** \_\_\_\_\_

**Owner:** \_\_\_\_\_

**Details of Repair:** \_\_\_\_\_

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

I hereby authorise the agent or nominated repairer to enter the property with the keys in order to inspect and/or carry out the necessary repair.

I authorise the agent to give my details to the repairer to liaise with me and arrange for the repair to be carried out while I am present.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Office use only

**Tradesman:** \_\_\_\_\_ **O/No:** \_\_\_\_\_

**Contacted:** \_\_\_\_\_ **Completed:** \_\_\_\_\_