



water damage repair and rectification

property address: _____

property owner: _____

tenant/s: _____

portfolio manager: _____

date water damage/maintenance reported: _____ time: _____

reported by: _____

action date: _____ time: _____ completion date: _____

PM Record on TaskTracker™

PM Log details of water repair and damage to computer

PM Log action and follow-up tasks with timelines for completion

PM Note if water damage reported by: tenant third party

PM Is Critical Incident Report Form required: yes no

PM if yes, confirm Critical Incident Report has been emailed

PM If reported by third party: Log name to computer

PM Is the third party the:

HOA Insurance Company Property Owner Neighbor

• Company name if applicable: _____

• Name of contact: _____

• Phone: _____

• Cell/mobile: _____

• Email: _____

• Skype: _____

PM Advise property owner

PM Advise tenant if reported by another party

PM Advise insurance company

• Company name if applicable: _____

• Name of contact: _____

• Phone: _____

• Cell/mobile: _____

• Email: _____

• Skype: _____

• Date advised: _____

PM HOA's details if different from above

• Company name if applicable: _____

• Name of contact: _____

• Phone: _____

• Cell/mobile: _____

• Email: _____

• Skype: _____

• Date advised: _____

PM Arrange estimates 3 quotations for repair

Estimate 1:

• Company: _____

• Contact person: _____

• Phone: _____

• Date: _____

Estimate 2:

• Company: _____

• Contact person: _____

• Phone: _____

• Date: _____

Date Initials



Estimate 3:

- Company: _____
- Contact person: _____
- Phone: _____
- Date: _____

ONCE ESTIMATES HAVE BEEN RECEIVED:

- PM** Forward estimate to relevant party
HOA Insurance Company Property Owner Neighbor _____
- PM** Date estimate sent: _____ _____

No work is to proceed until written authority has been received from the property owner. Arrangement for payment must also be made in writing.

- PM** Estimate approved and instructions received _____
- Date instructions received: _____
 - Name of person authorizing: _____
 - Contractor approved: _____
 - Amount authorized: _____
- PM** Supplier/maintenance provider advised of repair authorization and arrange work to be commenced. Date: _____ _____

ON COMPLETION:

- PM** Invoice received. Date received: _____ _____
- PM** Relevant contact advised so inspection can be carried out prior to payment
HOA Insurance Company Property Owner Neighbor _____
- PM** Insurance claim processed if applicable _____
- PM** Forward email to property owner confirming completion of repair _____
- PM** Forward email to tenant confirming completion of repair _____

TrackMate™ verified for completion: _____ Date: _____

NB: If any item is not applicable write next to item N/A