

Work Order Request Form

Pickawillany Condominium Unit Owners Association

I would like to request that the following items be inspected for repair.

UNIT ADDRESS _____

TYPE OF REPAIR _____

Description of work requested (include location & details):

[illegible]

Signature

Print Name

Date _____

EMAIL TO: khovath@casebowen.com

TELEPHONE: Case Bowen at (614) 799-9800

MAIL TO:

The Case Bowen Company
6255 Corporate Center Drive
Dublin, OH 43016