



THE MAYNARDS BLOCK

CUSTOMER SERVICE REQUEST FORM

Please fill out ALL contact information in full

Name: _____	Date: _____
Suite No.: _____	Strata Lot: _____
Home/Cell #: _____	Business Number: _____
Suite is: _____ Owner Occupied _____ Tenant Occupied _____ Not Occupied	
Permission to enter Contact Phone Number: _____	
Email Address: _____	

Please provide a clearly written and precise description of your request. Customer Care will forward all repair requests to our Construction Department who will contact you to schedule an appointment.

Please note that we can only accept service request from the Owner of the Suite.

Tenants – please submit all customer Service enquiries through your Landlord

To process please fax to
CUSTOMER CARE – 604-684-1125 or email this form to customer.care@aquilini.com
THANK YOU