Waterside Housing Co-operative
Unit Request Forms

Date: _____ Unit: _____ Member: _____
(Please Print)

Description of request:

_____
_____
_____
_____
_____
_____
_____
_____
_____

Approved ( ) Not Approved ( ) Postponed ( )

Reason/description for/of postponement:
(Example: needs BOD approval; Approval next Budget mtg, etc)

_____
_____
_____
_____

_____
Chair of Maintenance (print name)

_____
Chair of Maintenance (sign name)

_____
Vice-Chair of Maintenance (print name)

_____
Vice-Chair of Maintenance (sign name)