



Residential Development Request for Repairs

Date: _____

House #: _____

Trailer # _____

Land Location: _____ ¼- _____ - _____ - _____ - _____

Name:	Band No.:
Phone No.:	Work No.:
Email Address:	

Work Requested

- Patio/Deck Ramp Window/s Mold Bath Mold Kitchen Plumbing Furnace
 Electrical Door/s Flooring
 Mold Walls Ceiling Shingles/Roof Handicap bath Infestations
 Furnace Cleaning Water Well Service Septic Tank Vac Sewer Pumps

Details of your request:

This application does not guarantee you approved repairs.

Disclaimer:

Samson Cree Nation Residential Development will not be held responsible to the maintenance and repairs to said house/trailer due to neglect, fire, self-damage or vandalism or any other damages that may occur during course of construction. Samson Cree Nation Residential Development is not responsible for accommodations and utilities during construction. ALL requests are to be directed to Residential Development and put on the wait list. No verbal agreements will be honoured. It is your responsibility to update contact information. Once approved for repair, your house/unit will be provided a Work Order and Inspection Report that you are required to sign off prior to Contractor being paid. Please be prepared to vacate house/unit for a minimum of 8 hours for fumigation (pest control).

Home Occupant _____ Home Occupant _____

PLEASE RETURN TO

Email: scn.housingrd@gmail.com

Box 159 Maskwacis AB T0C 1N0

Ph.: 780-585-3919