

# SERVICE REQUEST

**Kessler and Company**  
2820 W. Maple Road, Suite 201D  
Troy, Michigan 48084

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RUSSELL.W.GRAHAM@GMAIL.COM

Date: \_\_\_\_\_ Emergency Status: \_\_\_\_\_ Type: \_\_\_\_\_

Service Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Tenant's Name: \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Service Vendor: \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

Estimate \_\_\_\_\_ Completed \_\_\_\_\_ Final Cost \$ \_\_\_\_\_

Service Vendor: \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_

Estimate \_\_\_\_\_ Completed \_\_\_\_\_ Final Cost \$ \_\_\_\_\_

Owner Contacted Y N Email \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_ Proceed Y N

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Comment: \_\_\_\_\_  
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Quotes: \_\_\_\_\_  
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