



CUSTOMER CARE – On-Line Service Request Form

Date of Request: _____ Name: _____
 Address: _____ Close Date: _____
 Flat Suite Number: _____ Home Phone: _____
 Cell: _____

With the exception of emergencies, all requests for Customer Care must be in writing. Please use this form or the electronic form on our web site at vpliving.com (preferred) to notify us of warranty items. Drop off at the clubhouse. We will contact you to set an appointment. Customer Care appointments are available from 8:30am to 4:30pm Monday through Friday. Please note that Customer Care will not enter a home without adult supervision when only children under 18 are present.

PERMISSION TO ENTER

I have given a key to my home to Vantage Pointe Customer Care. I Authorize And Accept Responsibility For A Service Representative And/Or The Required Subcontractors To Perform The Requested Customer Care At My Home.

Please Check

 HOMEOWNER'S SIGNATURE

 DATE

Requested Repairs/Issue	Service Action/Date Completed	By
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

 Homeowner Signature

 Date

 Vantage Pointe Technician

 Date

Mail To:

Parkway Circle LLC. Attn: Customer Care 13500 Via Varra, Broomfield, CO 80020