

ESTATES DEPARTMENT
REQUEST FOR INSPECTION AND REPAIRS

Director

Estates Department

State department of Housing and Urban Development

NAIROBI

Name of tenant: _____

Estate: _____

House no. _____

Telephone Number: _____

Email address: _____

NATURE OF DEFECTS REPORTED:

DATE DEFECTS WERE NOTED: _____

Signature of Requesting Tenant: _____

Personal Number: _____

Date of request: _____

NB. Please attach certified copy of latest pay slip