

## Window Cleaning Complaint Form - Levels 11-56

Eureka Tower  
Building Management  
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Date: \_\_\_\_\_ Time: \_\_\_\_\_

Name: \_\_\_\_\_ Contact No: \_\_\_\_\_

Apartment: \_\_\_\_\_ Email: \_\_\_\_\_

### Description of Issue


### Affected window area


### When did you first notice the issue?

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### Drop number from drawing as supplied and detailed description of windows affected


Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

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Signed: \_\_\_\_\_

### Eureka Tower Office Use Only

CSP #: \_\_\_\_\_ Date: \_\_\_\_\_ Entered By: \_\_\_\_\_

Completed By: \_\_\_\_\_ Date Completed: \_\_\_\_\_

# Levels 11 - 56

