



**Customer Service Request Form**

**\*Please fill out ALL contact information in full\***

Name: _____	Date: _____
Suite No.: _____	Strata Lot: _____
<input type="checkbox"/> 38 Smithe Street <u>OR</u> <input type="checkbox"/> 68 Smithe Street	
Home or Cell Number: _____	Business Number: _____
Email Address: _____	
Fax Number: _____	

**Service Requests:**

Please provide a clearly written and precise description of your request. After a Review, the Customer Care Centre will forward all repair requests to our Construction Department who will contact you to schedule an appointment.

**\*Please note that we can only accept service requests from the Owner of the suite.  
Tenants - please submit all Customer Service enquiries through your Landlord\***

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

**CUSTOMER CARE CENTRE**

*To process, please Fax, Email or Mail to:*

**Fax: (604) 899-9183**

**Email: [customercare@concordpacific.com](mailto:customercare@concordpacific.com)**

**Mail To: ATTN: CONCORD ONE PACIFIC LIMITED PARTNERSHIP  
9<sup>th</sup> Floor – 1095 West Pender, Vancouver, B.C. V6E 2M6**