



CEHA TENANT COMPLAINT/CONCERN FORM

Date: _____

Complaint/Concern Made By:

Name: _____ Phone: _____

Address: _____

Complaint/Concern Against:

Name: _____

Address: _____

Note any other parties involved:

Name: _____

Address: _____

Date of incident: _____ Time: _____ AM/PM

Location of incident: _____

Explanation of Complaint/Concern:

I certify the foregoing statement is accurate and true to the best of my knowledge. If the City of Eureka Housing Authority institutes legal proceedings against the tenant about whom I am complaining, I understand that I may be called as a witness at such proceedings.

Signature

Date