



General Complaint Form

Instructions: Please fill this out completely. The City of Chandler Housing Division may have additional questions for you during the follow up of this complaint and will need to contact you.

CONTACT INFORMATION - Details on the reporting person			
Reporting Person's Name		Phone Number	
Address	City	State	Zip Code
Are you willing to testify if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Do you wish to remain anonymous to the person you are complaining about? <input type="checkbox"/> Yes <input type="checkbox"/> No			

INCIDENT INFORMATION - Details of the person being complained about		
Who is the complaint about?	Address:	
What occurred?		
When did it first occur?	Is it still Occurring? <input type="checkbox"/> Yes <input type="checkbox"/> No	Did you inform the police department? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the report number?
How do you know this information?	Vehicle description/License Plate #(s)	

For Office Use Only

Complaint Taken By: _____

Date: _____

Complaint Referred To: **Housing Choice Voucher**

Qiana Vickie Azucena

Public Housing

Kaitlyn Mayra Cristina

Copy provided to the following: Housing Officer Housing Supervisor Housing Manager