**Grievance Complaint**

**name:** {{ users[0].name.full() }}

**address:** {{ users[0].address.on\_one\_line() }}

**complaint:** Include all the facts that relate to your complaint. Attach additional sheets if necessary.

{{ complaint\_facts }}

Please write down what action you would like the Authority to take to resolve your complaint. Please be as specific as possible.

{{ action\_requested }}

{{ users[0].signature() }}{{ signature\_date }}

(Signature of Complaining Tenant) (Date)

This complaint form was part of the Department of Housing and Community Development’s model grievance procedure, issued on July 3, 2000 in Public Housing Notice 2000-3.