

TENANT COMPLAINT FORM

Date :	Visit to the Office Other			Other
Name of Plaintiff: (complaining tenant)				
Address:	Ap	t.	Phone:	
COMPLAINT				
Date of the event:				
Name of Offender : (wrongdoer)				
Address :			App.	
Noise Music/Television	Children	Alcohol	Visitors A	nimal
Parking Groups Harassment/Insults Violence Other				
DETAILS :				
ACTION TAKEN BY THE PLAINTIFF				
	brbal Notice lled the police			awyer's Letter ity Worker
 Office complaints treatment is strictly confidential. Plaintiff identity will not be revealed. Plaintiff will not be informed of interventions on other tenants as a result of the complaint or reporting. In the event of mediation, the complainant will be called to testify on the content of his written complaint with the presence of the offender and a representative of the Office. In he case of legal procedure, plaintiff will be called to testify at the Tribunal administratif du logement (formerly La Régie du logement) on the complaint content. 				

Plaintiff's signature