
What would you like the PHA to do about your complaint?

BY MEANS OF A RESIDENT’S SIGNATURE ON THE FORM, THE RESIDENT SWEARS THAT THE INFORMATION PROVIDED AND THE NAMES OF THOSE IDENTIFIED ARE TRUE AND REPRESENT FACTS. THE RESIDENT FURTHER AGREE TO APPEAR IN COURT OR AT A GRIEVANCE HEARING AS A WITNESS IF ACTION TAKEN ON THIS COMPLAINT RESULTS IN EVICTION PROCEEDINGS.

I HAVE READ AND UNDERSTAND THIS POLICY AS OUTLINED ABOVE.

Signature

Date

Print Name