



## Renter/Tenant Complaint Form

1) Landlord name: \_\_\_\_\_  
Address (Street, City and State): \_\_\_\_\_  
Phone number: \_\_\_\_\_ manager phone# \_\_\_\_\_

2) Tenant (s) name : \_\_\_\_\_  
Rental property address: \_\_\_\_\_  
Phone number: \_\_\_\_\_

Please provide a detailed description of the alleged violation(s) along with the dates and times the property owner was contacted to fix/correct the problem. You must provide evidence the property owner was first notified and received notification of the nature of the complaint, (whether by phone call, email, letter or text). The occupant is encouraged to provide photos of the evidence of violations, which will then become the property of the municipality and will not be returned. This form must be completed in full or no enforcement can be considered.

For issues of mold, you may also contact Public Health Madison & Dane County at (608)266-4821 or by email at [health@publichealthmdc.com](mailto:health@publichealthmdc.com). Do not ignore emergencies, if you smell gas, leave the property immediately and call your utility company.

All forms must be signed by the tenant(s). Also, please include a copy of your rental agreement with this form. For additional tenant resources, including sample letters to property owners when requesting repairs you may contact the Tenant Resource Center (608- 257-0006 – [www.tenantresourcecenter.org](http://www.tenantresourcecenter.org))

Please describe the alleged violation(s) below along with the dates and times the landlord was contacted to fix the alleged problems:

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