

CITY OF HOUSTON

Housing & Community Development Department Substandard Living Condition Complaint Form (PLEASE PRINT YOUR INFORMATION IN A LEGIBLE MANNER)

Date:				
Complainant's Name:Last Name			First Name	
Contact Numbers:Home Number			Cell Number	
Are you a resident of the subsidized Property?				
Name of Subsidized Property:				
Property Address:			Unit #:	
City:	State:		Zip Code:	
Property phone number:	Property Manage	er's Nar	ne:	
Has grievance been communicate to property? _	Yes	No,	If so, when?	
Complaint:				
Please mail your complaints to:				
City of Houston				

City of Houston HCDD, MF Compliance and Monitoring 601 Sawyer, 4th floor Houston, TX 77007