



City of Monroe

1110 18th Avenue, Monroe, WI 53566

Phone: (608) 329-2533 Fax: (608) 329-2561

Tenant Complaint Form

Contact Name: _____

Contact Address: _____

Contact Phone Number: _____

Address of complaint: _____

Date of complaint: _____

Landlord: _____

Landlord Phone number: _____

Landlord Address: _____

Property Maintenance Group: _____

Nature of complaint: _____

Explain the complaint:

How long has the issue been ongoing? _____

Has the complaint been addressed with the landlord? _____

If yes, when, and have any improvements been made?

Is anyone in danger? _____

Signature Date

NOTE: In order to use the "Submit Form" button, you must download the form and open in Adobe Acrobat/Reader. Otherwise, the form can be saved and emailed to ameier@cityofmonroe.org.

Please also visit the Tenant Resource Center at <http://www.tenantresourcecenter.org/>

TO BE COMPLETED BY THE CITY OF MONROE BUILDING INSPECTION OFFICE

Received by Date

Building Inspector Signature Date

Date complaint addressed with landlord: _____