

(today's date)

HOUSING DISCRIMINATION COMPLAINT

CASE NUMBER:

- 1. Complainant(s)**

- 2. Other Aggrieved Persons**

- 3. The following is alleged to have occurred or is about to occur:**

- 4. The alleged violation occurred because of:**

- 5. Address and location of the property in question (or if no property is involved, the city and state where the discrimination occurred):**

- 6. Respondent(s)**

- 7. The following is a brief and concise statement of the facts regarding the alleged violation:**

- 8. The most recent date on which the alleged discrimination occurred:**

- 9. Types of Federal Funds identified:**

10. The acts alleged in this complaint, if proven, may constitute a violation of the following:

Please sign and date this form:

I declare that I have read this complaint (including all attachments) and certify that it is true and correct, to the best of my knowledge.

(Type Complainant's name)

Date

N O T E: HUD WILL FURNISH A COPY OF THIS COMPLAINT TO THE PERSON OR ORGANIZATION AGAINST WHOM IT IS FILED.