Department of Homeland Security U.S. Coast Guard COPIED FM ISCAHSG-002	HOUSING COMPLAINT FORM

Section I: Complainants Information: *The person making this complaint shall complete blocks 1-11 and deliver this form to the Housing Office*.

Please Print

1. Complainant's Name *(last, first, MI)*:	2. Rank/Family Member:
3. Complainant's Permanent Duty Station *(Include Work Phone):*	4. Complainant's Address *(Qtr &, Home Phone):*

Section II –Nature of Complaint/Offender Information:

5. Date & Time of Offense:	6. Location of Offense:
7. Offender's Name & Address *(if known):*	8. Offender's Rank/Family Member *(if known):*

9. How was Complaint Reported *(i.e. called OOD, Security, Local Police, Housing Office, etc.):*

10. Description of Complaint/Offense: *Please provide detailed information regarding the nature of the complaint/offense, i.e., who, what, where, when happened. (Use reverse or additional sheets if necessary).*

11. Complainant's Signature:	Date:

Section III – Housing Office Action

12. Date & Time Complaint Received:	13. Housing Personnel Assigned to Case:
14. Action Taken *(i.e. Met with complainant/offender, dismissed, contacted command/ WLS, etc.):*	15. Warning Letters Issued: O Yes O No *(If yes, enter date of letter):*