

TENANT COMPLAINT FORM LOS ANGELES HOUSING DEPARTMENT

3550 Wilshire Boulevard, 15th Floor
Los Angeles, California 90010

1645 Corinth Ave., #104
Los Angeles, CA 90025

6640 Van Nuys Blvd.
Van Nuys, Ca 91405

690 Knox St., #125
Los Angeles, CA 90502

2215 N. Broadway Ave.,
Los Angeles, CA 90031



<http://lahd.lacity.org>

This box for City use only

Case No.: _____
 Investigator: _____
 Date Assigned: _____ CD #: _____
 RSU # _____
 Lupams [] Dataquick [] PI []
 Lupams [] Dataquick [] PI []

Formulario de quejas disponible en Español

THERE IS NO CHARGE FOR FILING COMPLAINTS:

SPECIAL NOTICE: The Rent Stabilization Ordinance (RSO) covers rental housing units within Los Angeles city limits. Telephone 1-866-557-RENT or 1-866-557-7368 for more information on rental units covered by the RSO.

SUBJECT: This Complaint can be filed by any tenant who has documentation that shows that an owner/manager/agent has committed a violation of the Rent Stabilization Ordinance of the City of Los Angeles.

YOUR NAME:		OWNER'S NAME:
ADDRESS WHERE VIOLATION OCCURRED: (INCLUDE CITY/ZIP CODE)		OWNER'S ADDRESS:
HOME TELEPHONE NUMBER:	WORK TELEPHONE NUMBER:	OWNER'S TELEPHONE NUMBER:
BEST TIME TO CALL YOU:		MANAGER'S NAME:
ANOTHER ADDRESS WHERE YOU CAN BE REACHED:		MANAGER'S ADDRESS:
REGISTRATION CERTIFICATE # (IF KNOWN):		MANAGER'S TELEPHONE NUMBER:

TYPE OF RENTAL UNIT:

- House Duplex Apartment Mobile Home
 (Two or more on a lot) Hotel/Motel Guest Room/House Other

HOW DID YOU FIND OUT ABOUT THE RENT STABILIZATION ORDINANCE?

- | | | |
|----------------|-------------------------------|-----------------|
| [] Hot Line | [] Mailings | [] Other _____ |
| [] Radio | [] Phone book | |
| [] Television | [] Newspaper | |
| [] Friends | [] Council offices | |
| [] Legal Aid | [] Other Government agencies | |

How much is your current rent? \$ _____

How many bedrooms do you have? 0 1 2 3 4 5

How many people live in your home? _____

How long have you lived at this address? _____ yrs. _____ mos.

INSTRUCTIONS:

- 1. Complete the complaint form as best as you can. If you cannot answer a question, you may leave it blank.
- 2. **REMEMBER TO SIGN AND DATE THE COMPLAINT FORM BELOW.**
- 3. Attach photocopies of your supporting documentation.
- 4. Mail or bring the complaint form to any of the following locations: **Los Angeles Housing Department, 3550 Wilshire Boulevard, 15th Floor, Los Angeles, CA 90010; 3415 Sepulveda Blvd., #150 Los Angeles, CA 90034; 6640 Van Nuys Blvd., Van Nuys, CA 91405; 690 Knox St., #125 Los Angeles, CA 90502; 2215 N. Broadway Ave. , Los Angeles, CA 90031. Office hours: 9:00 a.m. to 4:00 p.m. Monday through Friday.**

REASON FOR THIS COMPLAINT:

Please mark the box(es) indicating the type of violation(s) that occurred.

- Your rental unit is not registered. (Complete section **A** below.)
- Notice to Quit (Eviction Notice) is based on false and deceptive grounds. (Complete section **B** below.)
- Non-payment of Relocation Assistance. (Complete section **C** below.)
- Illegal Rent. (Complete section **D** below.)
- Reduction of Services. (Complete section **E** below.)
- Failure to Post RSO notice.

A. UNIT(S) NOT REGISTERED:

1) Is your unit registered? <input type="checkbox"/> Yes <input type="checkbox"/> No
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B. NOTICE TO QUIT BASED ON FALSE AND DECEPTIVE GROUNDS:

1) Have you received a written notice to move out? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, give date of notice_____

C. NON-PAYMENT OF RELOCATION ASSISTANCE FEES:

1) What reason was stated for requesting you to move?

D. ILLEGAL RENT:

1) Give date when the illegal rent increase was demanded or collected.						
2) What was the amount of rent before the increase?						
3) What was the amount of rent after the increase?						
4) Who pays the gas and/or electricity bill for your unit?						
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">GAS</td> <td style="width: 50%; text-align: center;">ELECTRICITY</td> </tr> <tr> <td style="text-align: center;">Landlord <input type="checkbox"/></td> <td style="text-align: center;">Landlord <input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;">Tenant <input type="checkbox"/></td> <td style="text-align: center;">Tenant <input type="checkbox"/></td> </tr> </table>	GAS	ELECTRICITY	Landlord <input type="checkbox"/>	Landlord <input type="checkbox"/>	Tenant <input type="checkbox"/>	Tenant <input type="checkbox"/>
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Tenant <input type="checkbox"/>	Tenant <input type="checkbox"/>					

E. ILLEGAL REDUCTION OF SERVICES:

1) What was the service that you are no longer getting?

DOCUMENTATION TO SUPPORT YOUR COMPLAINT: Photocopies (not originals) such as: 1) Rent Receipts, 2) Rental Agreement, 3) Canceled Checks, 4) Notice or Letter to Quit, 5) Court Documents, 6) Notice from the City, and 7) Other Supporting Evidence.

SIGNATURE

DATE