

TIOGA/BRADFORD COUNTY HOUSING AUTHORITY TENANT COMPLAINT FORM



Contact Information:

Name: _____	
Address: _____	
Telephone Number: _____	Email: _____

Incident:

Date of incident: _____	Time: _____	am	pm
Where incident occurred: _____			
Who was present: _____			
Describe the nature of your complaint: _____ _____ _____			
Housing Authority Staff Members Notified (include when and how): _____			
What resolution are you seeking: _____ _____			

Please send to: Tioga/Bradford County Housing Authority
c/o Executive Director
112 Dorsett Heights
Mansfield, PA 16933
or email completed form to info@tbhra.org