



Rental Housing Complaint Form

Community Development Department
403 W. 4th St. N., Ste. 501
Newton, IA 50208
641-792-6622
www.newtongov.org

Only current tenants of a rental property/unit may file a complaint regarding a rental housing property using this form.

TENANT NAME: _____ DATE: _____

PHONE NUMBER: _____

PROPERTY ADDRESS (please include unit #): _____

OWNER/MANAGER NAME: _____

OWNER ADDRESS: _____
Street City State Zip

TELEPHONE: (HOME) _____ (WORK) _____

E-MAIL: _____

- Do you currently live at this residence?
o Please circle: (Y / N)
- Did you register a complaint with your landlord at least 14 days prior to this?
o Please circle: (Y / N)

DATE FILED: _____

Description of Complaint – Please describe the complaint in full detail including dates and times if appropriate. Continue complaint on back of this form if additional space is needed.

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Please attach any additional information, such as pictures displaying problems, communications with the owner/manager prior to this complaint, and/or any other supporting information.

I understand that by filing this complaint that the City of Newton will make contact with the property owner or owner's representative to investigate the problem. I also understand that the City will only investigate complaints that are from the current tenants of the property and that the name of reporting tenant is public information and will be released to the owner at the time of notice. The City will make contact with the owner or owner's representative within two (2) business days of the date this complaint is received. I understand that there are some items in which the City may not be able to assist and that in those cases the City will notify me using the contact information provided above.

SIGNATURE: _____

Official Use Only	
Complaint Received By: _____	\$75 Inspection Fee Collected? (Y / N)
Owner Notified Date: _____	Inspection Conducted? (Y / N)
Inspection Date: _____	Violations Found? (Y / N)
Inspector Assigned: _____	Deposit Returned / Fee Collected? (Y / N)