BOROUGH OF WALLINGTON

ILLEGAL HOUSING COMPLAINT FORM

COMPLAINANT INFORMATION

Name:
Address:
Phone:
Email:

PROPERTY INFORMATION

Property Address:
Property Owner (if known):
Tenant (if known):

TYPE OF COMPLAINT

☐ Illegal Apartment ☐ Basement Apartment ☐ Attic Apartment

☐ Garage Conversion ☐ Overcrowding ☐ Multiple Families

☐ Unpermitted Construction ☐ Unsafe Conditions

☐ Short-Term Rental ☐ Other _____

DESCRIPTION OF COMPLAINT

_____

_____

_____

_____

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OBSERVATIONS

Dates/Times Observed	
Approx. Occupants / Vehicles	

CERTIFICATION

I certify that the information provided is true and accurate to the best of my knowledge.

Signature	
Date	