



OFFICE OF HOUSING AND NEIGHBORHOOD DEVELOPMENT
11 PINE STREET, HAMDEN, CONNECTICUT 06514
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www.hamdencommunitydevelopment.com

FAIR RENT COMPLAINT – OWNER FORM

NAME: _____

ADDRESS: _____

DATE PROPERTY WAS PURCHASED: _____

Please provide the monthly dollar amount (\$) of the following for each disputed unit.

UNIT #	RENT	WATER	SEWER CHARGES	OTHER EXPENSES*	NET INCOME

**Other monthly expenses incurred by the unit which are paid by owner and not by the tenant*

Annual mortgage: _____

Annual property taxes, if not included in mortgage: _____

Annual property insurance, if not included in mortgage: _____

Annual property management fees (including attorney's fees): _____

Comments: _____

Signature

Date