Department of Homeland Security U. S. Coast Guard TCP-HSG FORM-005 (Rev. 01/19)

HOUSING COMPLAINT

Section I – General Information (Please Print)	
Complainant's Name (Last, First, MI):	
Complainant's Housing Site or Barracks Name:	
Complainant's Permanent Duty Station & Work Phone:	
Section II – Nature of Complaint / Offender Information	
Location of Offense:	Date & Time of Offense:
Offender's Name & Address (if known):	Offender Rank / Family Member:
How was Complaint Reported (i.e., called OOD, Local Police, Housing Office, etc.):	
Description of Complaint/Offense: Please provide detailed information regarding the nature of the complaint/offense, i.e., who, what where, when the offense occurred (use reverse or additional pages if necessary).	
Complainant's Signature:	Date:
OFFICE USE ONLY	
Action Taken: i.e., met with complainant/offender, dismissed, contacted command/WLS etc.	
Housing Representative Signature:	Time/Date Complaint Rcvd: