WALLINGTON RENT LEVELING BOARD TENANT COMPLAINT FORM

TENANT(S)(List all responsible)	CASE NUMMBER
	DATE
	NUMBER APARTMENTS
	DOES THE LANDLORD LIVE IN
ADDRESS	ONE OF THE UNITS
BUILDING # APT. #	
FLOOR	NO. OF ROOMS
TELEPHONE #	(Optional at this time)
BUILDING COMPLETED	EST. TOTAL SQ. FT
(MONTH/YEAR)	(Optional at this time)
	CASE
WRITTEN YES NO	OLD BENTAL (LAGRAGE)
START DATE	OLD RENTAL(LAST YEAR)
EXPIRATION DATE	CURRENT RENT \$
NEW RENT \$ AMOUNT OF LAST INCREASE \$	DATE OF LAST INCREASE ADDITIONAL SURCHARGE \$
CAPITAL IMPROVEMENTS \$	ADDITIONAL SURCHARGE \$
HOW WERE YOU INFORMED OF RENT IN If you were informed in writing, did you receive notice? YES NO WERE YOU INFORMED OF THE CONSUM YES NO (IF PROVIDED, ATTACH	ER PRICE INDEX FORMULA?
LANDLORD'S NAME	
MAILING ADDRESS	
TELEPHONE #	
	ATE THE NATURE OF YOUR COMPLAINT
CIVIC CENTER, WALLINGTON MUNICIPA	7:00 p.m. (To be filled in by Municipal Clerk) AL MEETING ROOM, 24 Union Blvd,
Wallington, NJ	

TO THE LANDLORD: THE ABOVE COMPLAINT HAS BEEN FILED WITH THE RENT LEVELING BOARD OF THE BOROUGH OF WALLINGTON. A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE INDICATED ABOVE. IF YOU WISH TO BE HEARD IN THIS MATTER, YOU HAVE THE RIGHT TO APPEAR AND BE HEARD. IF YOU FAIL TO APPEAR, THE BOARD MAY RENDER A DECISION ON THE COMPLAINT IN YOUR ABSENCE.