



REQUEST FOR COMPLAINT INSPECTION

Attention: Inspections Department

TENANT INFORMATION		
Name: _____	Date: _____	
Last 4 of SSN: _____	Email Address: _____	
Home Phone: _____	Cell Phone: _____	
Address: _____	Unit Number: _____	
City: _____	State: _____	Zip Code: _____

How long have you had the issue(s)? _____ days

Have you notified your landlord? No Yes Date you notified landlord: _____

How did you notify your landlord? Email Phone Online Work Order In Person

What is the best time to contact you? _____

I am requesting a complaint inspection for the above unit due to the following:

Please complete and return this form to SAHA through one of the below methods.

Fax: (210) 477-

Email: Inspections@saha.org

Mail to the following address:

**Inspections
P.O. Box 830545
San Antonio, TX 78283-0545**



The following person has been designated to coordinate compliance with the nondiscrimination requirement contained in HUD's regulations implementing Section 504: **Michaëlle Finch, 818 S. Flores, San Antonio, Texas 78204.**

SAHA
818 S. Flores St.
San Antonio, TX 78204
210.477.6000 | saha.org

