BURBANK LANDLORD-TENANT COMMISSION

TENANT INFORMATION

(One questionnaire per tenant)

Date: _____

Personal Information (Please print legibly)

Are you in litigation? Y/N *

*Please be advised if Yes, the Commission is not able to assist you, as your case is now a legal matter.

Name: _____ Contact Number: _____

Address: _____ E-mail: _____

City: _____ Move-in Date: _____

Unit Type: ☐ House ☐ Apartment ☐ Other

Do you have a lease: ☐ Yearly ☐ Month-to-month

Current Rent: _____

Lease Expiration Date: _____

Number of units in building: ____

Number of occupants: Adults ____ Minors ____

Number of bedrooms: ☐Studio ☐1 bedroom ☐2 bedroom ☐3 bedroom

Problem/Issue

Briefly Explain: _____

_____

_____

_____

_____

Repairs needed ***immediately***: _____

_____

When did you first report the problem to manager/owner? _____ Did they respond? Y/N

Is the manager on-site? Y/N

Property Information

Recent Rent Increases: Date: _____ From: $_____ To: $_____

Date: _____ From: $_____ To: $_____

Owner(s) Name: _____ Address: _____ Tel: _____

Prop. Mgr Name: _____ Address: _____ Tel: _____

Year Built: _____

AB1482

Are you being evicted? Y/N

If yes, were you given a Notice of Violation? Y/N

Were you given the opportunity to cure the violation(s)? Y/N

Were you given a relocation assistance or waiving of one month rent? Y/N

Attach any additional documentation to this form.

This form is completed voluntarily and the information it contains may be shared at an open public meeting.

RETURN TO:

CITY OF BURBANK HOUSING AUTHORITY

150 N. THIRD STREET, 2ND FLOOR

BURBANK, CA 91502

TEL: 818.238.5180

MLeyland@burbankca.gov