

CODE ENFORCEMENT COMPLAINT FORM

Los Angeles Housing Department

Manager Name	Phone #	Owner's Name	Phone #
	Attach additional violations o	r comments to this form or use t	the back of this form
omments:			
	Violation:		
Location:	Type of		
	Violation:		
Location:	Type of		
	Violation:		
Location:	Type of		
	Violation:		
Location:	Type of		
	Violation,		
Location:	Type of Violation:		
Location:	Type of Violation:		
		n, Maintenance. Plumbing, Sanitation,	Structural Hazards, Zoning violations
	tchen, Bathroom, Living Room, Bedr		
Telephone #	Cell Pho	ne	Email
Address	(Unit #	Zip Code
	Last Na		Date
First Name			Dete
APN #:		3. On the web, visit our web	osite at https://housing.lacity.org
Case #:		- ,	
CRIS Date:		1. By phone, LAHD hotline, call (866)-557-7368	