



Housing Fraud Complaint Form

CONFIDENTIALITY OF IDENTITY

The El Paso County Housing Authority (EPCHA) will protect the identity of complainants to the maximum extent allowed by law, and only release your identity to those officials who have a need to know. EPCHA employees who report allegations may also request confidentiality.

PLEASE PRINT

Housing Program (circle one): Public Housing/HCV

NAME OF INDIVIDUAL(S) INVOLVED:

Name(s):

Address:

Date of incident

Phone#

Report the specific details of the incident:

Where did the incident occur?

How many times did the incident occur?

Has this incident been reported to any authorities outside EPCHA such as Child/Adult Protective Services, Law Enforcement, etc? Please provide details and information

WOULD YOU LIKE TO PROVIDE YOUR NAME AND CONTACT INFORMATION IN THE EVENT EPCHA NEEDS ADDITIONAL INFORMATION

Name

Phone#

Date

Address

Email

(PLEASE PRINT)

Parent/Guardian Signature:

Attention:

EPCHA reserves the right to act or not to act on any information provided unless it is required to do so by law. EPCHA cannot provide information regarding what action has been taken on any allegations reported to us. Federal regulations prohibit the disclosure of information contained in law enforcement records, even to the individual making the allegations. Unless you are contacted directly by one of our investigators, there will be no communication from our office. Under no circumstance will we provide you with the status of an action taken on the allegations.