U.S. Coast Guard ISCAHSG-002 (Rev. 03/03)	HOUSING COMPLAINT FORM				
Section I: Complainant's Information: The person making this complaint shall complete blocks 1-11 and deliver this form to your Housing Office. Please Print					
1. Complainant's Name (last, first,	MI):			2. Rank/Fam	ily Member:
3. Complainant's Permanent Duty Station (Include Work Phone):			4. Complainant's Address (Street, City, State, Home Phone):		
Section II -Nature of Complaint/Offender Information:					
5. Date & Time of Offense:	nse: 6. Location of Offense:				
7. Offender's Name & Address (if known):					ffender's Rank/Family Member Fknown):
9. How was Complaint Reported (i.				, , , , , , , , , , , , , , , , , , ,	
10. Description of Complaint/Offense: Please provide detailed information regarding the nature of the complaint/offense, i.e., who, what, where, when happened. (Use reverse or additional sheets if necessary).					
11. Complainant's Signature:					Date:
Section III - Housing Office	e Action				
12. Date & Time Complaint Received: 13. Housing Personnel Assigned to Case:					
14. Action Taken (i.e. Met with complainant/offender, dismissed, contacted command/ WLS, etc.):				15. Warning Letters Issued: O Yes O No (If yes, enter date of letter):	