



Jackson/Teton County Affordable Housing Department Grievance Form

Staff will forward to the Jackson/ Teton County Housing Authority Board within 30 days who will render a decision at the next scheduled Board Meeting. Applicants will be provided an opportunity to provide evidence to the Board supporting the Grievance.

Please submit this form along with \$150.00 fee to the Housing Department.

Date Submitted _____

Name of Applicant(s) _____

Address _____

Phone _____ Email _____

Name and contact information for complainant's representative _____

Grounds upon which Grievance is based _____

Action or remedy requested _____

Applicant Signature

Applicant Signature

Please attach extra pages if more space is needed

For Housing Department Use Only

Date Received