



(Include house/apt number, street name, city, state, zip code)

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**List supporting documentation tenant included in this request:**

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**9. By signing below the tenant affirms the information provided above is accurate to the best of their knowledge...**

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Printed Tenant's First, Last Name

Tenant's Signature

Date:

**10. The Garrison Housing Office employee listed below acknowledges receipt of this Informal Dispute Resolution request:**

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Printed Name (Last, First)

Date of Receipt of Informal Dispute Resolution

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Telephone Number

Email Address