



## Fort Gordon Privatized Housing Informal Dispute Resolution Request Form

**1. Tenant's Name:** \_\_\_\_\_  
Grade          Last Name          First Name

**2. Residential Address:** \_\_\_\_\_

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

**3. Tenant Contact Information:**

- a. Home telephone number: ( \_\_\_\_\_ ) \_\_\_\_\_  
Area Code
- b. Cell phone number: ( \_\_\_\_\_ ) \_\_\_\_\_  
Area Code
- c. Email address: \_\_\_\_\_

**4. Preferred method of receiving correspondence relating to the matter:**

- a. \_\_\_\_\_ Residential address listed on line 2, above.
- b. \_\_\_\_\_ Email address indicated on line 3, above.

**5. Rental/Owner Company Name:** \_\_\_\_\_

**6. Rental/Owner Contact Information:**

- a. Contact Name (Last, First): \_\_\_\_\_
- b. Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_  
Area Code
- c. Email: \_\_\_\_\_

**7. Statement describing the dispute and prior efforts to resolve the dispute:**

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## Informal Dispute Resolution Request Form

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

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_
- f. \_\_\_\_\_

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

\_\_\_\_\_  
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:**

\_\_\_\_\_  
Printed Name (Last, First)

\_\_\_\_\_  
Date of Receipt of Informal Dispute Resolution

\_\_\_\_\_  
Duty Position or Title

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email Address