



Complaint of disorder

The complaint must be written and signed by at least two persons.

Information about the disorder

Who?	Name	
	Street address, apartment number , city and postal code	
What?	Description of the disorder, additional information	
When?	Is the disorder continuous? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Have you contacted the person causing distraction? <input type="checkbox"/> Date	
	Latest dates of distraction	
	date	time
	date	time
date	time	

Information about the complainants

The complainants information is **not told** to the persons mentioned in the complaint.

Who?	Name	Phone
	Street address, apartment number, postal code and city	E-mail
	date and time	signature
Who?	Name	Phone
	Street address, apartment number, postal code and city	E-mail
	Date and time	Signature

Raison Vuokra-asunnot Oy fills:

date and time	Receiver of the complaint and signature
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