

**BOROUGH OF CALDWELL**  
1 Provost Square, Caldwell, New Jersey 07006  
973-226-6100  
**RENT REVIEW BOARD (973) 403-4638**  
**TENANT COMPLAINT**

Name of Complainant: \_\_\_\_\_ Phone: \_\_\_\_\_ Day # \_\_\_\_\_

Address: \_\_\_\_\_ Apt # \_\_\_\_\_

Email address: \_\_\_\_\_

Complaint: (a) Increased Rent..... Amount: \$ \_\_\_\_\_

(b) Capital Improvement Surcharge..... Amount: \$ \_\_\_\_\_

(c) Failure to maintain existing services..... Amount: \$ \_\_\_\_\_

Have you signed or co-signed lease Yes \_\_\_\_\_ No \_\_\_\_\_

Length of Present Lease: \_\_\_\_\_

Length of Proposed Lease: \_\_\_\_\_

Name of Tenant: \_\_\_\_\_

Name of Tenant on Proposed Lease: \_\_\_\_\_

Name of Landlord: \_\_\_\_\_

Address of Landlord: \_\_\_\_\_

Type of Apartment Building: High Rise \_\_\_\_\_ Garden \_\_\_\_\_ Other \_\_\_\_\_

Monthly Rent: \_\_\_\_\_ Present Lease \_\_\_\_\_ Proposed Lease \_\_\_\_\_

Rent paid for each month last year: \_\_\_\_\_

Date of Occupancy: \_\_\_\_\_

What rent, if any, do you pay for parking: \_\_\_\_\_

Date which notification of increase was received: \_\_\_\_\_

REMARKS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby certify that I am the complainant named above and that the statements made in this complaint are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

SIGEND: \_\_\_\_\_ DATE: \_\_\_\_\_

WITNESSED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

(signature of witness only required when form is not delivered personally by complainant)