## ALBERT LEA HRA Incident Report Form

Your Address:		Your Phone:	to the second se
Today's Date:	··.	,	
	Incident Inf	o monation	
	•		
Person/People involved:	•		
Their address (s):			•
Where incident took place:			•
Date of incident:			
Were the police called:			•
•	•		
Please summarize the incident	(facts only, plea	se):	
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	•	•	
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•	•		~ <del>``</del> ;;
	<u>.</u>		·.
			•
	•	•	
		(please use ba	ck if necessary
Did you personally witness the	incident?	If not, who did?	:
			<del></del>

## **Incident Report**

Individuals submitting these reports should be aware that because of privacy laws and regulations relating to confidential handling of lease violations and other regulatory enforcement, the HRA may or may not provide the complainant with any follow up response regarding the outcome or end results of their complaint.

When the form is submitted it must be filled out completely. Incomplete or unsigned forms will not be considered for any further action on the part of the HRA. It is important to understand that some actions initiated by the HRA will result in possible criminal or civil actions undertaken in the court system and any person reporting violations may be called to testify as a witness to the reported activity.

In the case of possible criminal activity, the HRA will turn the reports and any other evidence over to law enforcement for their consideration and investigation.

All reports are to be completed and turned into the HRA office. In the event you have difficulty in writing or understanding the forms or reporting process, please bring the form into the HRA office and staff will assist you in completing the form. Any questions regarding this notification maybe directed to HRA staff.

Thank you for your cooperation with our office and the reporting process.