

Minnesota Tenant Report Form



The Office of the
Minnesota Attorney General
helping people afford their lives and live with dignity, safety, and respect

Information About You

Your Name

Suffix (Jr., Sr., etc.)

Street Address

City, State, Zip

Primary Phone

Alternate Phone

Email

Landlord Complained About

Name of Landlord You Are Complaining About

Contact Person if Different than Landlord (e.g., property manager)

Street Address

City, State, Zip

Phone

Email

Details of Complaint

If you wish to provide evidence you can include copies when you return this form.

Explanation of the Problem

What do you want the landlord to do?

By signing below, I consent to and acknowledge that the information I am providing may be used and/or disseminated by the Minnesota Attorney General's Office: (a) to resolve the issue about which I am contacting the Office, including by contacting any person or entity complained against; (b) to communicate with me; (c) to other law enforcement agencies and/or consumer-assistance agencies; and (d) to otherwise assist in enforcing the law. Except as otherwise authorized by this consent, I understand that the information I am providing will be treated as "private data on individuals" under the Minnesota Government Data Practices Act, Minn. Stat. ch. 13, and shall not be used or disseminated except as authorized under the Act or other applicable state or federal law. I understand that I am not legally required to provide the information I have submitted in this form, but that my failure to do so may make it more difficult to resolve my concern.

Signature

Date

**Please mail completed, signed form (and any attachments) to:
Office of Minnesota Attorney General Keith Ellison, 445 Minnesota Street, Suite 1400, St. Paul, MN 55101.**