Bennington Housing Authority
Grievance Hearing Log Page # _____

Date Grievance Filed:_____
Tenant Name:_____
Tenant Address:_____
_____

Name of Tenant Attorney (if any):_____
Tenant Attorney Contact Information:_____
_____

Date Notice of hearing and right to Representation sent to Tenant:_____
Date Notice of Hearing sent to Tenant Attorney (if applicable):_____
Notice sent by(Name)_____

Date of Hearing:_____
Name of Hearings Officer:_____
Names of Persons Attending Hearing:_____
_____
_____

Hearing Decision in favor of: ▫Housing Authority ▫Tenant
Specifics of Decision (what and why):_____
_____
_____(see attached sheet if necessary)

Hearing Decision sent to: ▫Tenant on (date):_____
▫Tenant Attorney on (date):_____
Decision sent by: (Name):_____
Method of sending decision:_____
Date by which Appeal must be filed:_____
Appeal filed: ▫ No ▫Yes, on (date):_____