



Kagså Kollegiet

5-Step Complaint Procedure

If you wish to file a complaint about another resident, please follow the five steps below. This applies to issues such as noise, smoking, and other disruptive behavior.

We recommend using the attached complaint form.

1. Contact the person you wish to complain about and try to resolve the issue peacefully.
(You must have attempted to resolve the issue yourself.)
2. If that doesn't help – talk to other residents to see if they experience the same issue and also wish to file a complaint.
3. Document the problem.
4. Write a complaint and attach documentation.
Remember to include tenancy details and signatures.
A complaint must come from at least two tenancies and be signed by both residents.
(In special cases, a single complaint may be sufficient.)
5. Send the complaint to the dormitory community by email at kollegierne@fa09.dk.
The house rules can be found at <https://kagsaakollegiet.dk> under *Residents / House Rules*.

Kind regards,
Kagså Kollegiet



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Complaint Form

Report regarding violation of the rules of conduct / house rules

I hereby notify the housing association that the following tenant has violated the department's rules of conduct / house rules:

Name: _____

Address:

To process the complaint, the administration needs precise information about the problems you are experiencing.

We require specific dates and times of the disturbances.

Please note that the administration is not allowed to process sensitive information such as health, race, or ethnic origin.

Therefore, we kindly ask you not to include such information.

The complaint concerns the following:

(If you need more space for your description, feel free to add an extra page.)

Date, place, and time of the violation of the rules of conduct / house rules:

Date(s):

Time period:

Previously contacted regarding the issue:

The resident

Property office

FA09



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Witness information:

Have others experienced / witnessed the violation?

– Co-signers will strengthen the case.

Complainant information:

Name:

Address:

Phone:

E-mail:

Date: / - 20 Signature: _____

Witness / Co-signer information:

Name 1:

Address:

Phone:

E-mail:

Date: / - 20 Signature: _____

Witness / Co-signer information:

Name 2:

Address:

Phone:

E-mail:

Date: / - 20 Signature: _____



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Witness / Co-signer information:

Name 3:

Address:

Phone:

E-mail:

Date: / - 20 Signature: _____

Witness / Co-signer information:

Name 4:

Address:

Phone:

E-mail:

Date: / - 20 Signature: _____