State of Connecticut

Department of Banking
Security Deposit Investigation

280 Trumbull Street, 16th floor
Hartford, CT 06103
Email: DOB.SD@CT.GOV
Fax: (860) 920-3028
Telephone: (860) 240-8154

Please:

- Type or print clearly in dark ink
- Complete both pages of the form and submit it by mail, email or fax
- Attach copies of supporting documents listed on the Checklist (page 3) - **Do not send originals**

Note: Sending incomplete or unclear forms may delay the processing of your complaint. You must provide your landlord written notice of your forwarding address. The best way is via a letter sent by certified mail with return receipt. If you cannot provide sufficient proof that you sent your landlord written notice, the Department may not be able to assist. Dates should be in MM/DD/YY format.

TENANT			**LANDLORD**		
Your Name			Landlord's Name		
Your Address			Street Address		
City/Town	State	Zip Code	City/Town	State	Zip Code
Daytime Telephone Number	Email Address (Optional)		Daytime Telephone Number	Email Address (Optional)	

RENTAL INFORMATION			
Rental Unit Street Address	City/Town	State	Zip Code
Name of Housing Complex (if any)			
Move In Date	Move Out Date	Amount of Security Deposit	Amount of any Other Deposit
Amount of Monthly Rent	Type of Rental ☐ Residential ☐ Vacation	Terms of Rental (check all that applied) ☐ Lease ☐ Month-To-Month	
Date You Last Paid Rent	Has interest been paid on the Security Deposit (If "YES", include date(s) and dollar amount(s)) ☐ YES ☐ NO		
Have you received any correspondence regarding your security deposit? (If "YES", enclose a copy including the envelope) ☐ YES ☐ NO			
Has any part of your security deposit been returned? (If "YES", enter the amount) ☐ YES ☐ NO			Has the check been cashed? ☐ YES ☐ NO
Has there been any court action involving this rental? (if "YES", enter docket number) ☐ YES ☐ NO			
Did you have roommates or co-renters? (if "YES", please provide their names) ☐ YES ☐ NO			
Did you accept a *Cash for Keys* offer? (if "YES", please provide a copy of the agreement) ☐ YES ☐ NO ☐ NOT SURE			
Does the landlord own other properties? (if "YES" list the address) ☐ YES ☐ NO			
Additional Comments (Attach additional pages if necessary)			

This complaint is being filed against the landlord named above for failing to: (check all that apply)(see the checklist on page 3 for required documentation required for each type of complaint)

- ☐ 1) I am a former tenant and my landlord failed to return my security deposit
- ☐ 2) I am a current tenant, 62 years age or older, and my landlord is holding a security deposit in excess of one month's periodic rent *
- ☐ 3) I am a current tenant, under the age of 62, and my landlord is holding a security deposit in excess of two months' periodic rent *
- ☐ 4) I am a current tenant and my landlord has not provided information regarding my escrow account * **

READ THE FOLLOWING BEFORE SIGNING BELOW

In filing this complaint, I understand that the Department of Banking is not my private attorney. I should contact a private attorney if I have any questions concerning my legal rights or responsibilities. I also understand that information I submit to this agency may be considered public information subject to disclosure under the Connecticut Freedom of Information Act, Connecticut General Statutes Section 1-200 et. seq. or Section 36a-21 of the Connecticut General Statutes, which may provide additional protection from disclosure.

I further understand that I may be required to testify in the event that the Department of Banking takes legal action in connection with my complaint.

By filing this complaint form, I authorize the Department of Banking to speak about my complaint or share this form and additional documentation included with the person or business I am complaining about or with other regulatory agencies.

The above complaint is true and accurate to the best of my knowledge.

Signature: _____Date: _____

* Department of Banking will close your complaint once tenancy is terminated

** Department of Banking will confirm the security deposit is in an escrow account, we will not provide the bank account number

Checklist

Documentation needed to initiate your complaint. Complaints will not be processed without the required documentation (Additional documentation may be required, any refusal or failure may result in your complaint being closed.)
Questions, please call (860) 240-8154

Enclose copies of the following for all types of complaints listed below:

- Proof that you paid a security deposit (receipt or front and back of cancelled check) ☐
- Copy of rental agreement(s) if available ☐
- Copy of any correspondence received or sent regarding the complaint ☐

In addition, enclose copies of the following for each type of complaint you checked off on the previous page

1) I am a former tenant and my landlord failed to return my security deposit.

- Proof that you provided your landlord written notice of your forwarding address. The best way is via a letter sent by certified mail with return receipt. ☐

2) I am a current tenant, 62 years age or older, and my landlord is holding a security deposit in excess of one month's periodic rent.

- Proof of Age (copy of state or federal ID) ☐
- Letter asking that overage be returned, must provide landlord with proof of age ☐
- Certified Mail Receipt ☐
- Certified Mail Return Receipt ☐

3) I am a current tenant, under the age of 62, and my landlord is holding a security deposit in excess of two months' periodic rent.

- Letter asking that the overage be returned ☐
- Certified Mail Receipt ☐
- Certified Mail Return Receipt ☐

4) I am a current tenant and my landlord has not provided information regarding my escrow account

- Letter to the landlord asking for written notice stating the amount of the security deposit and the name and address of the financial institution where the security deposit is being held ☐
- Certified Mail Receipt ☐
- Certified Mail Return Receipt ☐