

Complaint Form

Transient Accommodations



Transient accommodations are hotels, motels, bed and breakfasts, condominiums, resorts, or any other facility offering three or more lodging units to guests for periods less than thirty days. To submit a health and safety complaint about a hotel, motel, or other similar facility, fill out this form and send it to the Department of Health via email, fax, or mail.

Email: TransientAccommodation.Complaints@doh.wa.gov

Fax: 360-236-2261

Mail: Department of Health, Transient Accommodations, P.O. Box 47825, Olympia, WA 98504-7825

Today's Date:

Incident Date (or check-in date):

Your Information

Name:

Street Address:

City:

State:

Zip:

Home Phone:

Cell Phone:

Work Phone:

Facility Information

Name of Facility:

Room Number:

Street Address:

City:

State: WA

Zip:

Complaint Description

Describe your health and safety concerns in the space below. Include details, such as your room number, that will help us with a possible investigation. Attach any additional supporting documentation.