



NOTICE: INCOMPLETE AND UNSIGNED FORMS WILL BE RETURNED.
 DO NOT SEND ORIGINALS -- DOCUMENTS RECEIVED WILL NOT BE COPIED AND/OR RETURNED.
 PLEASE SEND COPIES OF ALL PAGES OF CONTRACTS (FRONT AND BACK) PROPOSALS, CANCELLED CHECKS (FRONT AND BACK), INVOICES,
 RECEIPTS, ADVERTISEMENTS, BUSINESS CARDS, CORRESPONDENCE, PERMITS, ETC.

COMPLETE THE FOLLOWING INFORMATION

| | | | | | |
|--------------------------------------|-------|-------|--|-------|--------------------------|
| NAME OF INDIVIDUAL FILING COMPLAINT: | | | CONTRACTOR NAME: (AS SHOWN ON CONTRACT/INVOICES) | | |
| COMPANY NAME: | | | COMPANY NAME: | | |
| ADDRESS | | | ADDRESS | | LICENSE NO. USED, IF ANY |
| CITY | STATE | ZIP | CITY | STATE | ZIP |
| PHONE () | | EMAIL | PHONE () | | EMAIL |

NATURE OF COMPLAINT

| RESIDENTIAL | COMMERCIAL |
|--|---|
| <input type="checkbox"/> UNLICENSED RESIDENTIAL CONSTRUCTION OR REMODELING <input type="checkbox"/> GROSS NEGLIGENCE OR MISCONDUCT <input type="checkbox"/> FAILURE TO PAY FOR GOODS OR SERVICES <input type="checkbox"/> LOANING A LICENSE TO AN UNLICENSED PERSON <input type="checkbox"/> ENGAGING IN WORK ON AN EXPIRED OR SUSPENDED LICENSE | <input type="checkbox"/> UNLICENSED COMMERCIAL CONSTRUCTION <input type="checkbox"/> BIDDING OR CONTRACTING WITHOUT A LICENSE <input type="checkbox"/> IRRESPONSIBLE ___ FAILURE TO PAY FOR GOODS OR SERVICES ___ FAILURE TO VERIFY LICENSE OF SUBCONTRACTOR ___ Other _____ |

PROJECT INFORMATION

| | | | | |
|--|--------------------|---|-------------------|------------------|
| PHYSICAL ADDRESS | | CITY | STATE | ZIP |
| IS PROJECT A <input type="checkbox"/> RESIDENCE <input type="checkbox"/> COMMERCIAL BUILDING <input type="checkbox"/> OTHER | | IS PROJECT <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> REMODEL | | |
| CONTRACT DATE | AMOUNT OF CONTRACT | AMOUNT PAID ON CONTRACT | DATE WORK STARTED | DATE WORK CEASED |
| WAS THE CONTRACT <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL IF WRITTEN, ATTACH A COPY OF THE CONTRACT. | | | | |
| WERE THERE ANY CHANGE ORDERS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, WERE THE CHANGE ORDERS <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> BOTH IF WRITTEN, ATTACH COPIES. | | | | |
| WHY DID YOU CHOOSE THIS CONTRACTOR? <input type="checkbox"/> REGULAR CUSTOMER <input type="checkbox"/> DOOR TO DOOR SOLICITATION <input type="checkbox"/> REFERRED BY SOMEONE <input type="checkbox"/> ADVERTISEMENT-PROVIDE COPY IF POSSIBLE. | | | | |
| BUILDING PERMITS OBTAINED BY <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> OWNER <input type="checkbox"/> DO NOT KNOW <input type="checkbox"/> NOT REQUIRED (ATTACH A COPY IF AVAILABLE) | | NAME OF BUILDING DEPARTMENT: | | |
| WERE ANY INSPECTIONS PERFORMED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, BY WHOM AND WHEN? | | | | |
| WHAT ATTEMPTS HAVE BEEN MADE TO CONTACT THE CONTRACTOR? <input type="checkbox"/> UNABLE TO LOCATE <input type="checkbox"/> PERSONAL CONTACT <input type="checkbox"/> TELEPHONE <input type="checkbox"/> LETTER (ATTACH COPIES) | | | | |
| HAVE YOU NOTIFIED THE CONTRACTOR IN WRITING OF THE ISSUES IN DISPUTE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, ATTACH COPIES OF WRITTEN NOTICE. | | | | |
| HAVE YOU OBTAINED AN ESTIMATE FROM ANOTHER CONTRACTOR TO CORRECT/COMPLETE THE PROJECT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, ATTACH A COPY OF THE ESTIMATE. | | | | |
| HAVE YOU HAD THE JOB CORRECTED OR COMPLETED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, ATTACH COPIES OF THE CONTRACT AND PROOF OF PAYMENT. | | | | |
| WERE ANY LIENS FILED ON THIS JOB? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, ATTACH COPIES. AMOUNT OF LIEN: \$ PERSON WHO FILED: | | | | |

