



COMPLAINT FORM
 STATE OF MARYLAND
 DEPARTMENT OF LABOR
DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING
 500 NORTH CALVERT STREET - BALTIMORE, MARYLAND 21202-3651
 HOME IMPROVEMENT..... 410-230-6309
 OCCUPATIONAL AND PROFESSIONAL LICENSING 410-230-6322

**DO NOT WRITE IN THIS SPACE
OFFICE RECORD**

DATE RECEIVED _____

BOARD _____

COMPLAINT NO. _____

LICENSING INFORMATION _____

EXPIRATION DATE _____

TYPE OF COMPLAINT - PLEASE CHECK

HOME IMPROVEMENT

HEATING, VENTILATION, AIR CONDITIONING, REFRIGERATION

OTHER
BOARDS: _____

PLEASE ADDRESS ENVELOPE TO THE PROPER BOARD/COMMISSION

PLEASE BE ADVISED THAT BY FILING THIS COMPLAINT IT MAY BE NECESSARY FOR YOU TO APPEAR AT A FORMAL HEARING BEFORE THIS BOARD/COMMISSION OR IN CRIMINAL COURT.

1. YOUR NAME

LAST _____

FIRST _____ MIDDLE INITIAL _____

STREET ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

HOME PHONE _____ WORK PHONE _____

I CAN BE CONTACTED AT THE EMAIL ADDRESS BELOW: YES NO
EMAIL ADDRESS _____

2. COMPLAINT AGAINST _____

TRADING AS _____

STREET ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

PHONE _____

EMAIL ADDRESS _____

3. CONTRACT INFORMATION

Did you enter into a contract? YES NO If "YES" was the contract Oral Written?

With whom did you enter into the contract? _____
(Give name of individual and/or company)

Date of contract (Month, Day, Year) _____ Amount of contract? _____

Did you pay for the services? YES NO If "YES" give amount \$ _____

4. Name of person who actually did the work or performed the service _____

Date the work was started _____ Last date work was performed _____
MONTH / DAY / YEAR MONTH / DAY / YEAR

Is there an arbitration clause in the contract? YES NO

5. Please give a detailed but concise explanation of your complaint in the order in which it occurred and attach any supporting documents (continue on a separate sheet if necessary. Type or print legibly.)

I CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

(SIGNATURE OF COMPLAINANT)

(DATE)

If this is a home improvement complaint and the contractor was licensed at the time of the contract, you may file a separate claim against the Home Improvement Guaranty Fund.