



STATE OF ARIZONA
BOARD OF TECHNICAL REGISTRATION
 1110 W. Washington, Suite 240, Phoenix, Arizona 85007
 (602) 364-4930 • Fax: (602) 364-4931 • <https://btr.az.gov/>

COMPLAINT FORM

Please fill out this form completely and legibly. Please print, using black ink, a typewriter, or computer.

Please note that a copy of this complaint could be provided to the individual(s) involved in your complaint. Also, you could be called to testify as part of a formal or informal proceeding, such as a hearing. Complaints filed with the Arizona Board of Technical Registration are subject to the Public Information Act. **In most cases, the Board must disclose the information you provide on the complaint form to any person who requests it, including the person against whom you are filing this complaint.** If you have any concerns about the disclosure of your personal information (name, address, etc.), please contact the Board before you file this complaint form and we can discuss it with you.

Your name	Business Phone	
Business Name, if any	Home Phone Number	Cell Phone Number
Mailing Address	Fax	
City, State, Zip Code	Email	

Name of individual you are complaining about		Name of Company	
Individual's profession & Registration No.		Address	
City	State	Zip	Email
Work phone	Home phone	Web site address	
Project Name and Location			

Please provide the information below regarding persons who can help provide information related to the alleged violation(s) you are reporting in this complaint:

Witness name	Address	Phone
Summary of information witness will verify:		
Witness name	Address	Phone
Summary of information witness will verify:		

What would you like the Board to accomplish in resolving your complaint?
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Nature of Your Complaint

Please note that upon receipt of a complaint, the Board will conduct a preliminary evaluation of the matter to determine whether allegations described in your complaint are within the Board's jurisdiction. Please review the statutes and rules enforced by the Board on our Website to ensure that you provide sufficient information and to ensure that the allegations are of a law within the Board's jurisdiction (www.azbtr.gov). You may call (602) 364-4930 to request to speak to someone in the Enforcement Unit.

Description of Your Complaint

Be specific. What happened? Who was involved, including city or county agencies (provide names, addresses and phone numbers)? Provide dates and details / timeline of events. Clearly describe each alleged statute and/or rule violation separately and enclose copies of any documents from any sources which will support your allegations. Include the date the incident(s) occurred and the address of the location where the incident(s) occurred.

(Attach additional sheet(s) if necessary)

I have attached supporting documentation as evidence.

- | | | | | | | |
|---|---------------------------------------|----------------------------------|--|--|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Contract | <input type="checkbox"/> Plans | <input type="checkbox"/> Surveys | <input type="checkbox"/> Letters | <input type="checkbox"/> Invoices | <input type="checkbox"/> Reports | <input type="checkbox"/> Calculations |
| <input type="checkbox"/> Specifications | <input type="checkbox"/> Photos | <input type="checkbox"/> Emails | <input type="checkbox"/> Business Card | <input type="checkbox"/> Advertisement | <input type="checkbox"/> Deposition | |
| <input type="checkbox"/> Plan Review Comments | <input type="checkbox"/> Other: _____ | | <input type="checkbox"/> Other: _____ | | | |

Before mailing your complaint, **make a copy of all of your documents** for your own file because we cannot return the documents once we open an investigation.

Is civil litigation or criminal prosecution involving the subject of this complaint currently contemplated or in process?

No Yes If yes, please explain. _____

I HEREBY AFFIRM THAT THE ABOVE STATEMENTS ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

Signature

Date