

CONSTRUCTION INDUSTRY LICENSING BOARD (CILB) OF PALM BEACH COUNTY

PZB/CONTRACTORS CERTIFICATION DIVISION 2300 N JOG ROAD, SUITE 2W-61 WEST PALM BEACH, FL 33411-2741

Telephone: (561) 233-5525
EMAIL: PZB-INVESTIGATIONS@pbcgov.org
WEBSITE: www.pbcgov.com/pzb/contractors

Complaint/Referral Against a Contractor



All information provided is public record and is available for inspection by the public under the Florida Public Records Law. This includes all of the information you have included in this complaint and supporting documentation.

Contact Information					
Name	Home Phone				
Address		City		State	Zip
Address		Oity		State	Σιρ
Mobile Phone	Work Phone				
Email					
Contractor Information					
Name		Company Name			
Address		City		State	Zip
					'
Phone		Fax			
License # Used		Contact Derson			
License # Used		Contact Person			
Email					
Complaint/Referral Initiat	ion				
☐ By Owner					
☐ By General Contractor Against Sub	ocontractor				
☐ By Subcontractor Against General	Contractor				
☐ By PBC Department/Division					
☐ Complaint by a Government Entity					
☐ Other					
Project Information					
Construction Site Owner Name	Construction Site	Owner Phone			
					r
Construction Site Owner Address		City		State	Zip
Construction Site Physical Address	City		State	Zip	
Information on the work for which you contracted:					
Contract Date Date Work Started			Date Work Ceased		
Amount	Amount Paid on Contract				
\$	\$		☐ Check ☐ Cash	☐ Cred	dit
Why did you choose this contractor?					
☐ Regular Customer ☐ Door-to-Door Solicitation ☐ Referral ☐ Advertisement					
Other Please explain:					

Is this project a:					
☐ Residence ☐ New Construction ☐ Commercial Building ☐ Public Utility ☐ Other					
Please explain:					
☐ Repair ☐ Remodel ☐ Addition ☐ Other					
Please explain:					
Was the contract:					
☐ Written ☐ Oral ☐ New Home Purchase Agreement ☐ Public Utility ☐ Other					
Please explain:					
Were there any change orders?					
☐ Yes ☐ No If yes, were they: ☐ Written ☐ Oral ☐ Both					
Is your complaint:					
☐ Abandonment ☐ Quality of Work ☐ No permits ☐ Other					
Please explain:					
Was a permit obtained?					
☐ Yes ☐ No ☐ Unknown					
If yes, permit pulled by: ☐ Contractor ☐ You ☐ Salesperson ☐ Public Utility ☐ Unknown					
Permit # Department					
Was a Notice of Commencement filed?					
☐ Yes ☐ No ☐ Unknown					
Who presented contract? Who was the contract presented to?					
☐ Contractor ☐ Salesperson ☐ Other Name of person/Company:					
Name:					
Does the contractor have employees or is a subcontractor?					
☐ Yes ☐ No ☐ Unknown					
If yes, how many:					
Did you dismiss the contractor, cease and desist the contractor or terminate?					
☐ Yes ☐ No ☐ Dismiss ☐ Cease and Desist ☐ Terminate					
Was any work performed?					
☐ Yes ☐ No ☐ Unknown					
Did you receive a "Notice to Owner?"					
☐ Yes ☐ No ☐ Unknown					
If yes, by whom:					
Were any liens filed on this job?					
☐ Yes ☐ No ☐ Unknown					
Did you file any claims or liens on contractor?					
☐ Yes ☐ No ☐ Unknown					

Have you filed a complaint with State of Florida Department of Business and Professional Regulation?				
☐ Yes ☐ No ☐ Unknown				
Are you attaching any documentation in support of your complaint?				
☐ Yes ☐ No				
Please list each documents (example: photos, contracts, etc.)				
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

What attempts have you made to contact the contractor?								
☐ Personal Contact	☐ Phone	☐ Letter	☐ Unable to Locate					
Have you obtained a	an estimate fro	m another	contractor to complete or correct the job?					
☐ Yes ☐ No								
If yes, please provide a copy with your complaint								
Contractor Name		Address		Phone				
Complaint Information								
Please give a complete description of your complaint.								
-								
-								

Please provide copies (front and back) of all paperwork related to your complaint, including copies of contracts and/or estimates, proof of payment and any other pertinent materials – including photographs. Please cross out all Social Security numbers and bank or credit card account numbers. If copies are not available, please indicate. Do not send original documents

*Proof of payment includes: (1) if payment was made by cash, a receipt reflecting payment; (2) if payment was made by check, a photocopy of the front and back of the negotiated check; (3) if payment was made by credit card, a photocopy of the credit card receipt or statement; (4) if a dispute was filed with your credit card company, the results of that dispute.

An attempt will be made to assist you and the contractor in negotiating a resolution whenever possible. If this is not possible, other actions may be taken depending on the result of an investigation.

- If the contractor is licensed, he/she will be informed of this alleged complaint and will be asked to contact us.
- We are unable to direct an unlicensed person to complete or correct any project.

Under penalty of perjury, I declare the facts contained herein are true, correct and complete.

We do not represent private citizens in court – nor can we collect money for you. Please contact an attorney for advice on filing such action.

Florida Statute §837.06 states: Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree.

Signature Date

This complaint form must be notarized in order to be accepted for investigation. Please return this completed form with all necessary documentation to the division address on page 1 or e-mail to:

PZB-INVESTIGATIONS@pbcgov.org.

Note STATE OF FLORIDA	ary Public		
COUNTY OF			
Sworn to (or affirmed) and subscribed before me this	day of, 20		
by			
(NOTARY SEAL)	(Signature of Notary Public-State of Florida)		
	(Print, Type, or Stamp Commissioned Name of Notary Public)		
Personally Known or Produced Identification	n		
Type of Identification Produced			