COMPLAINT FORM

State of Arkansas
Contractors Licensing Board

Mail to:
Arkansas Contractors Licensing Board
4100 Richards Road North Little Rock, Arkansas 72117
Phone (501) 372-4661 Fax (501) 372-2247
Email: contractors.licensing.board@arkansas.gov

1. Revised 09/2020
A. IF THIS CONTRACTOR IS LICENSED, THEY WILL BE INFORMED OF THIS ALLEGED COMPLAINT AND WILL BE ASKED TO RESPOND. THEY MAY BE ASKED TO CONTACT YOU IN RESPONSE TO THE COMPLAINT.

B. THE ARKANSAS CONTRACTORS LICENSING BOARD HAS NO AUTHORITY OR JURISDICTION OVER NON-LICENSED CONTRACTORS.

C. THE ARKANSAS CONTRACTORS LICENSING BOARD CANNOT REPRESENT PRIVATE CITIZENS IN COURT OR COLLECT MONEY ON YOUR BEHALF. PLEASE CONTACT AN ATTORNEY FOR ADVICE ON FILING SUCH AN ACTION.

D. THE ARKANSAS CONTRACTORS LICENSING BOARD DOES NOT FUNCTION AS A “DISPUTE RESOLUTION” BOARD AND CANNOT RESOLVE CONTRACTUAL DISPUTES BETWEEN PARTIES INVOLVED.

(NO ORIGINALS OR STAPLES)

PLEASE SEND COPIES OF ALL PAPERS RELATED TO YOUR COMPLAINT (CONTRACTS, CANCELLED CHECKS AND OTHER PERTINENT MATERIALS).

DO NOT SEND MORE THAN 10 PHOTOS, (NO ORIGINALS).

ALL INFORMATION SUBMITTED TO THE CONTRACTORS LICENSING BOARD IS PUBLIC RECORD AND SUBJECT TO FREEDOM OF INFORMATION ACT (FOIA) REQUESTS.

2. Revised 09/2020
COMPLAINT FORM

Arkansas Contractors Licensing Board
4100 Richards Road, North Little Rock, Arkansas 72117
Phone (501) 372-4661 Fax (501) 372-2247

Please answer as many of the following questions as possible

Complainant
YOUR NAME ___________________________________________________________________
YOUR COMPANY NAME (if you are a contractor/supplier) __________________________________________
ADDRESS____________________________________________________________
CITY, STATE, ZIP________________________________________________________
PHONE (contact number) _________________________________________________________________________
EMAIL _______________________________________________________________
WHAT IS YOUR RELATIONSHIP WITH THE CONTRACTOR/PROJECT (Circle all that apply)
Owner            Subcontractor            Supplier       General Contractor            Other

CONTRACTOR
NAME (as shown on contract/invoice) _______________________________________________________________
LICENSE NUMBER_______________________________________________________
ADDRESS ______________________________________________________________
CITY, STATE, ZIP ________________________________________________________
PHONE _________________________________________________________________

PROJECT TO BE INVESTIGATED

LOCATION OF THE PROJECT

PHYSICAL ADDRESS_____________________________________________________
CITY, STATE, ZIP ________________________________________________________

3. Revised 09/2020
INFORMATION ABOUT THE PROJECT

WHAT IS THE TYPE OF PROJECT? _______RESIDENTIAL _______COMMERCIAL

AMOUNT: ____________________ CONTRACT DATE: ____________________

DATE WORK STARTED_____________ DATE WORK CEASED______________

WHAT TYPE OF CONSTRUCTION? (Circle all that apply)
Addition   Repair   Replacement   New Construction   New Purchase

WHAT TYPE OF CONTRACT WAS INVOLVED? (Circle all that apply)
Oral   Written   New Home Purchase Agreement   Other

WERE THERE ANY CHANGE ORDERS? (Circle)  Yes   No

IF YES, WERE THEY (Circle) Written, Oral, or Both?

WHAT IS THE NATURE OF YOUR COMPLAINT? (Circle all that apply)
Abandonment   Workmanship   Money Owing   Non-payment   Other

HAVE YOU FILED IN COURT TO RECOVER DAMAGES ON THIS COMPLAINT?  Yes   No

IF YES, HAS A JUDGMENT BEEN ISSUED?  Yes   No

*IF YES TO EITHER QUESTION, PLEASE ATTACH APPLICABLE DOCUMENTATION WITH THIS FORM*

HAVE YOU MADE ANY ATTEMPTS TO CONTACT THE CONTRACTOR?  Yes   No

IF YES, WHAT ATTEMPTS HAVE YOU MADE? (Circle all that apply)
Unable to locate   Personal contact   Telephone   Letter

BRIEFLY DESCRIBE THE CONTRACTOR’S RESPONSE: ____________________________________
________________________________________________________________________
BASIS FOR THE COMPLAINT

Provide a detailed explanation to support the basis for your complaint below.

_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Please list issues in numerical order.

1. __________________________________________
2. __________________________________________
3. __________________________________________
4. __________________________________________
5. __________________________________________
6. __________________________________________
7. __________________________________________
8. __________________________________________
9. __________________________________________
10. _________________________________________
11. _________________________________________
12. _________________________________________
13. _________________________________________
14. _________________________________________
15. _________________________________________
16. _________________________________________
17. _________________________________________
18. _________________________________________
THE COMPLAINT PROCESS OF THE CONTRACTORS LICENSING BOARD DOES NOT TAKE THE PLACE OF THE CIVIL COURT OR SETTLE DISPUTES.*

224-25-5-10. COMPLAINTS AND INVESTIGATIONS

(a) The purpose of the complaints procedure is to effectively deal with issues affecting the licensure of Contractors. The complaints procedure is not intended to function as a dispute resolution process of a code enforcement process. Any complaint registered with the Contractors Licensing Board of alleged violations must be submitted in writing with proper information to identify job site, owner, if possible, any name and phone numbers of individuals and any other information that may tend to be useful in the investigation. The complainant must furnish their name, address and phone number in order to obtain any other information that may be necessary for proper investigation. A written response will be made to a complainant when investigation is closed if so requested.

Affidavit

I, _______________________, hereby swear or affirm that the above statements and information provided are true, correct and complete to the best of my knowledge. I further swear or affirm that I have personal knowledge of the allegations made within the complaint and that this complaint is made in good faith. I will assist in the investigation of this complaint, and if necessary, attend hearings and testify to facts. I understand that failure to cooperate with the investigation may result in dismissal of the complaint.

____________________________________
Signature of Complainant