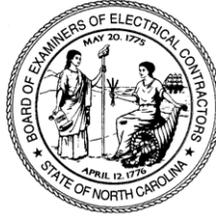


EXECUTIVE OFFICES
3101 Industrial Drive, Suite 206
Telephone: 919/733-9042
Fax: 800/691-8399



MAILING ADDRESS
P.O. Box 18727
Raleigh, NC 27619-8727
WEB SITE
www.ncbeec.org

STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS

COMPLAINT REPORT FORM

Memorandum

To: PERSONS REGISTERING A COMPLAINT
From: STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS

Enclosed is a complaint report form for your use in registering your complaint. Please provide all of the requested information and attach any other documents or information you feel are relevant to this matter.

Please mail this information to the Board's office at the address shown on the complaint report form. Upon receipt of your complaint, you will receive notification of the Board's staff representative to whom this case has been assigned and he will be your contact person regarding this matter.

Your assistance is very much appreciated and we assure you that your complaint will receive prompt attention.

Enclosure

COMPLAINT REPORT FORM

To: STATE BOARD OF EXAMINERS OF ELECTRICAL CONTRACTORS
P. O. Box 18727, Raleigh, NC 27619

PHONE: (919) 733-9042

FAX: (800) 691-8399

YOUR NAME _____
(PLEASE PRINT OR TYPE)

ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

PHONE BUSINESS # () _____ HOME # () _____

CELL PHONE # () _____ EMAIL _____

COMPLAINT REGISTERED AGAINST:

NAME OF PERSON _____

NAME OF COMPANY _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ COUNTY _____

PHONE BUSINESS # () _____ HOME # () _____

CELL PHONE # () _____ EMAIL _____

Please attach any relevant documents. **Complaints of Code violations must cite each specific Code reference.** Use the back of this form to give details of the complaint.

COMPLAINT REPORT FORM

Details and Facts of Complaint

The above statements are true to the best of my knowledge and belief.

(Signature)

DATE _____