

FORMAL CONSUMER COMPLAINT

Site of Complaint				
Street or Road	City	Со	County	
Owner(s) Name	Home Phone #			
Address				
Street or PO Box	City	County	Zip	
Owner(s) Name				
Company Owner(s) Name	Master License #			
Address				
Street or PO Box	City	County	Zip	
Company Phone # Date of Insta		allation		
Check all that apply below: HVAC Person <i>not</i> licensed.				
Incompetence, deliberate disregard, or violation	n of the building or other a	applicable codes.		
Faulty installation, maintenance, alteration, or r	repair of:			
Heating system Cooling System V	entilation System			
Other				
There is currently ongoing court litigation in t	his matter in	County	•	
I understand and agree that I may be subpoenaed to testify consumer complaint.	if a hearing is held before th	e HVAC Board as a resul	t of this formal	
Owner(s) Signature		Date		



HVAC VIOLATION OR DEFICIENCY

(ADDITIONAL PAGES MAY BE USED IF NEEDED)

Explain in detail, starting with the date on which issues were first discovered, all issues with the HVAC system:			
Please include your expectations as to how this matter should be resolved:			
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