MIAMI-DADE COUNTY
DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
Contractor Licensing Enforcement Section
11805 SW 26th Street (Coral Way), Room 230
Miami, FL 33175-2474
Phone: (786) 315-2561

miamidade.gov

MIAMI-DADE COUNTY CONTRACTOR COMPLAINT FORM

Date: _____

Dear Citizen:

The Contractor Enforcement Section of the Miami-Dade County Department of Regulatory and Economic Resources investigates complaints involving Miami-Dade County contractors. In addition, the Office investigates complaints concerning the work of unlicensed contractors.

In order to register your complaint, please complete the enclosed form and return it to the Building Code Support Division located at 11805 SW 26th Street, (Coral Way), Room 230 Miami, Fl 33175. If insufficient space is provided on the complaint form for any answer, please use a separate sheet. **Do not write on the reverse side of this form.**

All complainants must submit front and back copies of their contract and front and back copies of all canceled checks or receipts evidencing payment to the contractor at the time you file your complaint. In addition, please submit copies of any business cards or any advertisements used by the contractor or his employees that you have in your possession. Do not send original documents under any circumstances.

Upon receipt of the completed complaint form and accompanying documents, an Investigator will open a case file and a copy of your complaint will be sent to the contractor for response. Since the Investigator may have to contact you for additional information, please provide a telephone number where the Investigator can contact you during the day. When the investigation is complete and the Investigator has confirmed a violation of the contractor licensing laws, the Investigator will either issue tickets or notices of violation to the violator, initiate a case in criminal court through the State Attorney's Office or present the case before a committee of the Construction Trades Qualifying Board known as the Probable Cause Panel in order to initiate a formal disciplinary hearing. If the Probable Cause Panel orders a formal hearing, a hearing before the Construction Trades Qualifying Board will be scheduled. Upon a finding of guilty, the Board may impose one or more of the following penalties: reprimand, suspension or revocation of the contractor's license, restitution or imposition of fines of up to $5,000.00 per count.

Since investigations and cases vary in complexity duration and priority, a definite time frame cannot be given as to when the complaint process will be completed for any individual case. Further, because the Statute of Limitations establishes time limits within which you must assert a cause of action in court, please do not delay in consulting with an attorney or initiating any action to preserve your civil remedies in this matter. Finally, you may have certain rights under Florida law if you have suffered damages caused by a state certified or registered contractor with whom you have a signed contract. Contact the State of Florida Department of Business and Professional Regulations for additional information at 850-487-1395.

Thank you for your cooperation.

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COMPLAINT FORM

(Please Type or Print)

This complaint becomes a matter of public record at the time it is filed and is available for review and copying by the subject of the complaint and the general public.

Your Name: _____

Address: _____

_____

_____

Telephone: ( ) _____ Cellular: ( ) _____
Business

( ) _____
Residence

SUBJECT OF COMPLAINT

Name: _____
Person and/or Company

Address: _____

_____

_____

Telephone: ( ) _____ Beeper: ( ) _____

License No.:_____
[If Known]

If the contractor is state licensed, you need to also file a complaint with the State of Florida Department of Business and Professional Regulation (DBPR). For information on the filing of complaints with DBPR, please call 305-470-5617 or 850-487-1395.

I am complaining in my capacity as:

- ✎ Homeowner
- ✎ Owner of Commercial Structure
- ✎ Contractor
- ✎ Other _____

1. Have you filed a complaint with any other agency? ✎ Yes ✎ No (If so please provide name of Agency) _____

2. If necessary, are you willing to go to Criminal Court, and testify under oath in this case? ✎ Yes ✎ No

BACKGROUND DATA

3. Was contract in writing? ✎ Yes ✎ No If yes, enclose copy

4. Contract Price: $_____ Date on contract_____

5. Job address: _____

6. Contractor employees you had contact with. Name: _____

Name: _____ Name: _____

CONTRACT INFORMATION

7. Was the contract signed in your presence? ✎ Yes ✎ No By whom: _____

8. At the time you entered into the contract, did you believe the person/company was a contractor licensed or certified by the State of Florida and/or Miami-Dade County? ✎ Yes ✎ No

8a. If yes, why? _____

_____

8b. Would you have hired this contractor if you thought he was unlicensed? ✎ Yes ✎ No

_____

9. Was there any discussion as to whether the person/company was affiliated with another person/ company that was licensed or certified? ✎ Yes ✎ No If so, what was said, when and by whom?

_____

_____

10. What work was supposed to be done under the terms of the contract?_____

_____

_____

_____

11. Why are you dissatisfied? _____

_____

_____

_____

_____

_____

12. If additional contracts/agreements were signed with the same or related contractors, please explain the circumstances?

13. Was there any discussion as to whether building permits would be obtained? ✎ Yes ✎ No if so, please relate what if anything was said, by whom and when the statement was made.

14. Was work begun by your contractor? ✎ Yes ✎ No If so, what date? _____ Describe the extent of work actually done by the contractor and the value of work done, if you know?

15. When was the last time the contractor performed work on the jobsite? _____

16. Have you had discussion with him or his representative since then? ✎ Yes ✎ No if so, what was said?

17. Did he work steadily from the date he started work until the last day he worked? ✎ Yes ✎ No If so, please relate what happened between these dates. _____

18. Has an architect or engineer employed by you or the contractor inspected the work? ✎ Yes ✎ No If so, please provide name, address and telephone number and a copy of the report: _____

19. Has the contractor offered or made attempts to make repairs? ✎ Yes ✎ No _____

_____

20. Have you fired the contractor? ✎ Yes ✎ No How was the contractor terminated? _____

_____

_____

_____

21. Would the contractor be allowed to return to finish work or do repairs? ✎ Yes ✎ No if so, what type of work remains to be done? _____

_____

_____

_____

22. Has the job now been completed by you or another contractor? ✎ Yes ✎ No

FINANCIAL INFORMATION

23. **Total paid to contractor: $_____ If you made payments, please list who received the payments, the date of the payments, and the amount paid and form of the payments (check, cash, or credit). Who were the checks made payable to? Please provide copies front and back of all checks. If cash was given, provide copies of all receipts.

_____

_____

23a. Has the contractor repaid any monies to you? ✎ Yes ✎ No

23b. If yes you **must** notify the Investigator assigned to your case.

24. What is the actual or estimated cost to finish the job if you hire another contractor? $_____ Attach **copies** of estimate(s) from licensed contractor(s).

25. Have you had to pay subcontractors or suppliers directly? ✎ Yes ✎ No If yes, how much and why?

_____

_____

_____

_____

26. Are there now unpaid bills owed to subcontractors or suppliers whom the contractor should have paid?

✎ Yes ✎ No If so, how much is owed? _____

_____

27. Did contractor sign any statements to the effect that all bills have been paid? ✎ Yes ✎ No If so, please provide a copy.

28. Did you obtain a partial or full release of lien from your contractor? _____(If you have said documents, please attach a copy.) Who provided you with this release? _____ When? _____Were any payments made based upon your reliance on said release?_____

_____

29. Have any suppliers, material person, subcontractors or anyone else advised you or actually placed liens on your property?_____If so, please list the name, address and telephone number of the person/entity, the amount of the lien, and an explanation of what work/services/materials were supplied that gave rise to the claim or lien. (Please attach copies of all notices/claims of lien filed on your property.)

_____

_____

_____

_____

Florida Statutes 837.06, False Official Statements: Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of this official duty shall be guilty of a misdemeanor of the second degree.

_____ _____
Signature Date

_____
Print Name

STATE OF FLORIDA, COUNTY OF MIAMI-DADE:

Sworn to and subscribed before me this _____ day of _____ 20_____,

By_____.

Personally known_____

_____
Notary Public, State of Florida

Produced Identification_____

Type: _____

(SEAL)