Dear Homeowner:

If the work you are concerned about was done in the City of North Port and the contractor is a State Certified or State Registered Contractor, simply complete the enclosed form, add supporting documentation and return it to:

Neighborhood Development Services Attn: Contractor Licensing 4970 City Hall Blvd North Port, FL 34286

IMPORTANT

- If the contractor is State Certified Contractor, you may also file your complaint with the State of Florida. To file a complaint, you may go to the State's website: https://www.myfloridalicense.com/entercomplaint.asp or call (850) 487-1395.
- If the work was not done in the City of North Port, then your complaint **cannot** be filed with this office.
- If the work was done in the City of North Port, a complaint file will be opened and given to the building official for investigation once the complaint form is returned. Once the investigation has been completed you will be informed in writing to determine what issue(s) we can address. The contractor will also be informed in writing to the outcome of the investigation.

Please keep in mind that Neighborhood Development Services, Building Division can address **Building Code issues only** and **cannot** address civil matters such as contract disputes nor issues of workmanship.

Thank You,

Contractor Licensing

Neighborhood Development Services Contractor Licensing 4970 City Hall Blvd, North Port, Florida 34286 Telephone: (941) 429-7017 Fax: (941) 429-7180

E-mail: bldginfo@cityofnorthport.com

City of North Port Neighborhood Development Services

4970 City Hall Blvd, North Port, FL 34286

Contractor Complaint Form



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COMPLAINA	NT INFORMA	TION	
If you wish to list a contact person othe	er than yourself an a	additional space is provide	d.
N	Nicol		
Name: Address:	Name Addre		
Address.	Addre	2 55.	
Phone:	Phon	e:	
Email Address:	Emai	Email Address:	
Occupation:	Occu	pation:	
CONTRACTO	R INFORMAT	ΓΙΟΝ	
Name:			
Company Name:			
Address:	City:		
State:	Zip:		
Phone:	Emai	:	
License Number (if known):	•		
Gene	ral Questions	(Please	check one)
Have you contacted the contractor concerning complaint?		Yes	No
What was the date that you contacted the contractor?		Date:	•
Are there documents involved?		Yes	No
Are the documents attached?		Yes	No
Do you have a private attorney?		Yes	No
List the attorney's name:			
Address:			
Phone:			
	Vitnesses		
(List full names and addresses) 1)			
2)			
3)			

Give full details of your complaint. Include facts, details and dates. Attach copies of bills, documents, records, correspondence and contracts.

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