Florida Board of Professional Engineers

UNIFORM COMPLAINT FORM

Florida Board of Professional Engineers

2400 Mahan Drive

Please return to:

Tallahassee, Florida 32308 Contact (other than yourself) Type or Print Name: _____ Your Name: _____ Address: Address: (ZIP)_____ ____(ZIP)____ Telephone ____ Telephone _____ Business Your Occupation: SUBJECT OF COMPLAINT Name:______Engineer and/or Engineering Firm Address:______ Telephone:_____ City: _____ State:_____ License # (if known):_____ Date: Have you contacted subject concerning complaint? Yes No **Private Attorney** (if applicable) Name Telephone State Zip Because of the Statute of Limitations, please do not delay in consulting with an attorney or initiating any actions to preserve your civil remedies in this matter. The Board cannot be your legal representative. Matters, which involve monetary recovery or questions of restitution for damages, are civil in nature and should be addressed to the court with appropriate jurisdiction. Witnesses (Please give full name and address)

Please see other side

Please give full details of your complaint. documents, records, correspondence, plans a		details, and dates.	Please attach copies of
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 his official duty shall be guilty of a misdemeanor of the second degree.			
Signature (required to file complaint)		Date	