Nebraska Board of Geologists

Mail to: PO Box 94844
Lincoln, NE 68509-4844

Delivery: 215 Centennial Mall S, Suite 400
Lincoln, NE 68508

Phone: 402-471-8383
Fax: 402-471-0787

Questions? Contact us at nebog.board@nebraska.gov or nebog.nebraska.gov

COMPLAINT FORM

- *Mail this form and all supporting documentation to the Board.*
- *Include copies of ALL DOCUMENTS, including plans, letters, contracts, agreements, invoices, receipts, correspondence, photographs, etc. Do not send original documents. Attach extra pages if required – be as complete as possible.*
- *Every attempt will be made to keep the name of the person filing the complaint, confidential, although identity may be disclosed if an enforcement action results and the person is called as a witness. However, the form must be signed on the reverse in order for the Board to initiate an investigation.*

1. RESPONDENT (The person against whom the complaint is being made):

Name _____ *License Number (if known)* _____

Company _____ *Phone* _____

Address _____ *Fax* _____

Email _____ *Other Information* _____

2. COMPLAINANT (The person making the complaint):

Name _____ *Phone* _____

Address _____ *Fax* _____

Phone _____ *Email* _____

Best time to contact you _____

3. PROJECT ADDRESS (if applicable):

Street _____

City _____ *Parcel No (if known)* _____

4. Do you have documents prepared by the Respondent? _____Yes _____No

6. Did you and the Respondent sign a written contract, letter, or agreement? _____Yes _____No

7. Did you try to resolve this complaint with the Respondent? _____Yes _____No

8. Did the Respondent respond? *Explain (use additional sheets if needed)* _____Yes _____No

Board Use Only

Date Received _____ Case Number _____

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9. DESCRIBE YOUR COMPLAINT. *Be specific. What happened? Who else is involved, including city or county agencies/officials (names, addresses, phone numbers), location of evidence? Give dates and details.*

By signing below, I declare that the information contained in this complaint, including any attached pages, is true and correct to the best of my knowledge and belief.

Signature (must be signed to initiate an investigation)

Date