



Northern California: Sacramento Intake and Mediation Center P.O. Box 269116, Sacramento, CA 95826-9116 800.321.CSLB (2752)

Southern California: Norwalk Intake and Mediation Center 12501 East Imperial Hwy, Suite 620, Norwalk, CA 90650 800.321.CSLB (2752)

Fire Protection Complaint Referral

REPORTING AGENCY and CONTRACTOR INFORMATION sections with fields for Agency Name, Contact Person, Street Address, City, County, State, Zip Code, Phone Number, Email Address, Contractor Name, DBA, License Number, Employees Present, and How Many.

PROJECT INFORMATION section with fields for Owner of Construction Site, Construction Site Address, Street Address, City, State, Zip Code, Type of Work, and Phone Number.

NATURE OF REFERRAL section with checkboxes for Contractors License Law, Unlicensed Activity, Other B&P Code Violations, Health & Safety Code, International/Uniform Fire Code, International/Uniform Building Code, California Code of Regulations, California Fire Code, National Fire Code, Municipal Code, and Other.

DATES OF OCCURRENCE(S): and ADDITIONAL INFORMATION fields.

To expedite CSLB's investigation, please provide as much information as possible. Attach copies of code sections violated; the ordinance adopting the code, if appropriate; notices of violations; and copies of all correspondence between your agency and the contractor. Return the completed form and attachments to the nearest CSLB office.

SUBMITTED BY: and DATE: fields.

FOR OFFICE USE ONLY section with a grid for tracking complaint details including Complaint Number, Type, Date Received, Special Project, DT Stat Exp, CSR Init, Assigned to CSR, ER Init, Assigned to ER, License Number, Closure Letter, Disposition, Date Closed, Status Change, and STP.



Complaint Form Instructions

The following directions have been included to ensure that the "Fire Protection Complaint Referral" form is completed correctly.

Reporting Agency – Identify the agency/department that is filing this complaint and the (physical) address and phone number of the contact person so a CSLB investigator can make contact without delay.

Contractor – Identify the contractor/company that the complaint is being filed against. The full name of the contractor or the company name must be identical to the one on file with CSLB. The physical address and phone number should be given in case the CSLB investigator wishes to meet with the contractor. The contractor/company license number and classification should be listed. (Example: License No. 123456, C-16)

Project Information – The job address is the site or location where the violation occurred. Provide the owner's name, current/active address, and phone number so CSLB can make contact.

Nature of Referral – It is essential that the referenced law(s) and/or regulation(s) is clearly identified as being a violation so a CSLB investigator can proceed.

Example: If the contractor has clearly violated a section of the Health and Safety Code, that box would be checked and the specific section noted:

Health and Safety Code Section 13143

Date(s) of Occurrence(s) – The date of the act (installation and/or omission) and the discovery date are very important. It is essential that both be as accurate as possible. List both dates if at all possible. If you cannot determine the exact date of the "act," be as specific as possible with respect to the month and year.

Example: Date of Occurrence – 09/15/11
Date of Discover – 10/18/12

Additional Information – Be as specific as you can with the nature of the act/omission, and how you became aware of the violation. Provide as much information, in as much detail, as possible. Include copies of:

- Code sections
- Ordinance adopting the code, if applicable
- Notices of violations
- Copies of all correspondence between your agency/department and the contractor

If additional space is needed, please use blank white paper, type-written, and double-space. The more detail given, the quicker the CSLB investigator will be able to follow up on your complaint. Be specific; general terms like "contractor will not comply with our requirements" means little to the investigator.

Example: Was informed by Mr. _____ on (date) that (contractor) was installing pipe at (physical address). On the morning of (date), I drove to the site and observed pipe being installed. Mr. _____, the pipe fitter for (company), informed me that their company never gets plans approved prior to installation, etc. This project proceeded without submitting plans or receiving approval. The following violations have been identified: (list all violations including code sections).

Submitted By – This line should be signed by the same person who is identified as the contact person in the reporting agency/department or their direct supervisor.

Date – This is the date on which the Fire Protection Complaint Referral form was signed and mailed to CSLB.