



PUBLIC PROTECTION CABINET
Department of Housing, Buildings and Construction
 Division of HVAC
 500 Mero Street, FL 1
 Frankfort, Kentucky 40601-1298
 Phone: 502-573-0395, Fax: 502-573-1401
 www.dhbc.ky.gov

Consumer Complaint
 No: _____

Date Received: _____

FORMAL CONSUMER COMPLAINT

Site of Complaint _____
Street or Road City County

Owner(s) Name _____ **Home Phone #** _____

Address _____
Street or PO Box City County Zip

Company Name _____

Company Owner(s) Name _____ **Master License #** _____

Address _____
Street or PO Box City County Zip

Company Phone# _____ **Date of Installation** _____

The Board may revoke, suspend, place on probation, or restrict the license or certificate of any licensee or certificate holder; refuse to issue or renew a license or certificate; or reprimand, censure, or fine a licensee or certificate holder for violation of KRS 198B.650 to KRS 198.689.

Check all that apply below.

- HVAC person **not** licensed.
- Incompetence, deliberate disregard, or violation of the building or other applicable codes.
- Faulty installation, maintenance, alteration, or repair of:
 - Heating system Cooling System Ventilation System
 - Other _____

There is currently ongoing court litigation in this matter in _____ County.

I understand and agree that I may be subpoenaed to testify if a hearing is held before the HVAC Board as a result of this formal consumer complaint.

Owner(s) Signature _____ **Date** _____

HVAC 17 (05-20)

