



# Escambia County Contractor Competency Board

3363 West Park Place  
Pensacola, FL 32505

(850) 595-4560  
(Fax) 595-3401

## INFORMATION SHEET FOR FILING A COMPLAINT

The Escambia County Contractor Competency Board is available to assist Property Owners in resolving a complaint against a Licensed Contractor. We are a governmental agency that provides assistance to the general public according to Escambia County Ordinances and Florida State Statutes. Please read the following information carefully and if you have any questions, please feel free to call our office at 850-595-4560.

The Contractor Competency Board strives to act as a liaison to assist the Property Owner. This can be achieved if both parties are cooperative. Resolution may result a Property Owner needing to provide access to their building by the Contractor against whom the complaint is filed.

The Contractor Competency Board may take any of the following actions against any License holder or Registrant:

- 1) place the licensee on probation or reprimand;
- 2) revoke, suspend, or deny issuance or renewal of a certificate, registration, or certificate of authority;
- 3) require financial restitution to a consumer for financial harm directly related to a violation of a provision of ordinances or statutes;
- 4) impose an administrative fine not to exceed \$5,000 per violation;
- 5) require continuing education
- 6) assess costs associated with investigation and prosecution, if the contractor, financially responsible officer, or business organization for which the contractor is a qualifying agent, is found guilty of any of the following acts:
  - (a) knowingly combining or conspiring with an uncertified or unregistered person by allowing his or her certificate, registration, or certificate of authority to be used by the uncertified or unregistered person with intent to evade the provisions of this part.
  - (b) committing mismanagement or misconduct in the practice of contracting that causes financial harm to a customer.
  - (c) abandoning a construction project in which the contractor is engaged or under contract as a contractor. A project may be presumed abandoned after 90 days if the contractor terminates the project without just cause or without proper notification to the owner, including the reason for termination, or fails to perform work without just cause for 90 consecutive days.
  - (d) falsely indicating that payment has been made for all subcontracted work, labor, and materials which results in a financial loss to the owner, purchaser, or contractor; or falsely indicating that workers' compensation and public liability insurance are provided.
  - (e) committing fraud or deceit in the practice of contracting.
  - (f) committing incompetency or misconduct in the practice of contracting.
  - (g) committing gross negligence, repeated negligence, or negligence resulting in a significant danger to life or property.
  - (h) proceeding on any job without obtaining applicable local building department permits and inspections.
  - (i) failing to satisfy, within a reasonable time, the terms of a civil judgment obtained against the licensee or the business organization qualified by the licensee, relating to the practice of the licensee's profession.

Please complete the attached complaint form and return it to the Contractor Competency Board with relevant paperwork that pertains to your complaint, such as a copy of a contract or canceled checks. We will evaluate your complaint and an appointment will be scheduled with an investigator.

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 Contractor Competency 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.



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## Licensed Contractor Complaint Form

Nature of Complaint \_\_\_\_\_

### ***Complainant Information:***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email: \_\_\_\_\_

### ***Contractor Information:***

Company Name: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| Do you have a written contract?                    | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Have you made any payment to contractor?           | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Have you made final payment?                       | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Have permits been obtained and inspections made?   | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Have you contacted contractor regarding complaint? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Have you filed legal action against contractor?    | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

***Please attach copies of contracts, canceled checks, bills, correspondence with the contractor, etc. Please provide a brief explanation of your complaint:***

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***Signed:*** \_\_\_\_\_ ***Date*** \_\_\_\_ / \_\_\_\_ /17  
**Return form and copies to address above**