



# NEVADA STATE BOARD OF ARCHITECTURE, INTERIOR DESIGN & RESIDENTIAL DESIGN

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## CONSUMER COMPLAINT FORM

**IMPORTANT:** You MUST sign Page 3 of this form. This form may be submitted via U.S. mail or fax. Please do not forget to enclose supporting information, such as copies of a contract, evidence of payment, copies of drawings and/or any written communication between the subject and complainant. Complaints submitted without back-up information are difficult to investigate and will slow the process considerably. More information about the complaint process can be found on the board's Web site, nsbaidrd.state.nv.us.

### 1. Subject (person complaint is against)

Full Name \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State  Zip Code \_\_\_\_\_

Business Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Registrant's License No. \_\_\_\_\_  
(if applicable)

### 2. Complainant (person making the complaint)

Full Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State  Zip Code \_\_\_\_\_

Business Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Best time of day to contact you \_\_\_\_\_

### 3. Project address

Street No./Street \_\_\_\_\_

City \_\_\_\_\_ Parcel No. (if known) \_\_\_\_\_

4. Do you have copies of cancelled checks or other evidence of payment to the subject?  
(If yes, please provide copies.)

Yes  No

5. Do you have design plans prepared by the subject? (If yes, please provide copies.)  Yes  No

6. Did you and the subject sign a written contract or letter of agreement before any services were rendered? (If yes, please attach a copy.)  Yes  No

If you did not have a written contract or agreement, please provide a detailed description of the scope of services the subject was to provide for this project (attach extra pages if needed).

**7. Describe your complaint and specify pertinent dates (attach extra pages if needed).**

**The filing of this complaint does not prohibit you from filing a civil action. Please read the following statement and sign and date the form where indicated.**

**I hereby certify under penalty of perjury under the laws of the state of Nevada that to the best of my knowledge all of the above statements are correct. If called upon, I will assist in the investigation or in the prosecution of the subject of this complaint or other involved parties, and will, if necessary, swear to a complaint, attend hearings and testify to facts.**

Signature

\_\_\_\_\_

Date

\_\_\_\_\_