# ALABAMA ONSITE WASTEWATER BOARD

P.O. BOX 303552
MONTGOMERY, ALABAMA 36130-3552
PH: 334-353-9250
www.aowb.alabama.gov

# LICENSEE COMPLAINT FORM

**OFFENDER'S NAME** (LICENSED OR UNLICENSED)

**YOUR NAME** (LICENSEE FILING COMPLAINT)

**ADDRESS OF COMPLAINT**

**YOUR ADDRESS**

**CITY** **STATE** **ZIP**

**CITY** **STATE** **ZIP**

**OFFENDER'S PHONE NUMBER**

**YOUR PHONE NUMBER**

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**DATE THE ORIGINAL WORK WAS PERFORMED (IF KNOWN)** _____

**DID YOU PERFORM WORK ON THE OSS AFTER THE OFFENDER?** ☐ **YES** ☐ **NO**

**DO YOU HAVE PICTURES OR VIDEO?** ☐ **YES** ☐ **NO**

**DO YOU HAVE COPIES OF AN INVOICE?** ☐ **YES** ☐ **NO**

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PLEASE EXPLAIN THE ENTIRE CIRCUMSTANCES SURROUNDING YOUR COMPLAINT. (ATTACH ADDITIONAL SHEETS AS NEEDED).
PLEASE MAIL THIS FORM TO: AOWB, PO BOX 303552, MONTGOMERY, AL 36130-3552 OR EMAIL TO:

**aowb@aowb.alabama.gov**

**PLEASE BE SURE TO SIGN AND DATE THIS COMPLAINT FORM**

**SIGNATURE** **(PERSON FILING COMPLAINT)**

**DATE**

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## LICENSEE COMPLAINT FORM (PAGE 2)

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**SIGNATURE** **(PERSON FILING COMPLAINT)** **DATE**