



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

=====

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**

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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