

Mail completed form to: WYOMING BOARD OF PROFESSIONAL GEOLOGISTS 2617 E. LINCOLNWAY, STE I CHEYENNE, WY 82001 (307) 742-1118	FOR BOARD USE ONLY DATE RECEIVED _____ DATE REVIEWED _____
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COMPLAINT FORM

COMPLAINT FILED AGAINST:		
NAME		
COMPANY NAME		
ADDRESS		
CITY	STATE	ZIP

PERSON FILING COMPLAINT:		
NAME		
ADDRESS		PHONE NUMBERS
CITY	STATE	ZIP
HAVE YOU FILED ANY PREVIOUS COMPLAINTS WITH THIS BOARD?		HOME ()
		BUSINESS ()

DETAILS OF COMPLAINT:	
Have you communicated your concern to the person or company? If yes, on what date and by what means: _____ _____ _____ _____	YES [] NO []
Did the person or the company respond? What was said or done? _____ _____ _____ _____	YES [] NO []
What is the nature of the alleged violation? _____ _____ _____ _____ _____	
Name, address and telephone number of any attorney assisting you: _____ _____ _____ _____	

