



Department of Professional and Occupational Regulation

9960 Mayland Drive, Suite 400
Richmond, VA 23233-1485
complaintanalysis@dpor.virginia.gov
www.dpor.virginia.gov

COMPLAINTS (804) 367-8504
VA RELAY 7-1-1

FAX (866) 282-3932

HOTLINE FOR OLDER VIRGINIANS (804) 367-2178

HOW TO FILE A COMPLAINT

The Department regulates the following professions and occupations:

ARCHITECT	FAIR HOUSING BOARD	REAL ESTATE
ASBESTOS ABATEMENT	GEOLOGIST	REAL ESTATE APPRAISER
AUCTIONEER	HEARING AID SPECIALIST	SURVEYOR IN TRAINING
BARBER	HOME INSPECTOR	SURVEYOR PHOTOGRAMMETRIST
BODY-PIERCER	INTERIOR DESIGNER	TATTOOER
BOXER	LANDSCAPE ARCHITECT	TIMESHARE ACT
BRANCH PILOT	LAND SURVEYOR	TRADESMAN
CEMETERY	LEAD ABATEMENT	WASTE FACILITY OPERATOR
COMMON INTEREST COMMUNITIES	NAIL TECH/SALON/SCHOOL	WATERWORKS & WASTEWATER WORKS
CONDOMINIUM	OPTICIAN	WAX TECHNICIAN
CONTRACTOR	POLYGRAPH EXAMINER	WETLAND DELINEATOR
COSMETOLOGIST/SALON/SCHOOL	PROFESSIONAL ENGINEER	WRESTLER
ENGINEER IN TRAINING	PROFESSIONAL SOIL SCIENTIST	
ESTHETICIAN	PROPERTY OWNER'S ASSOCIATION ACT	

The Regulatory Programs & Compliance Division of the Department of Professional and Occupational Regulation (the "Department") reviews complaints to determine whether the Department is authorized to process the complaint. The Department will only process complaints against individuals or businesses that are subject to the laws or regulations of regulatory boards within the Department.

TIME FOR FILING A COMPLAINT

Any complaint against a regulant for any violation of statutes or regulations pertaining to the regulatory boards, in order to be investigated by the Department, shall be made in writing, or otherwise made in accordance with Department procedures, and received by the Department within three years of the act, omission or occurrence giving rise to the violation.

Where a regulant has materially and willfully misrepresented, concealed or omitted any information and the information so misrepresented, concealed or omitted is material to the establishment of the violation, the complaint may be made at any time within two years after discovery of the misrepresentation, concealment or omission.

WHAT HAPPENS WHEN YOU FILE A COMPLAINT

The complaint will be reviewed to determine whether a violation of a law or board regulation may have occurred. If the evidence supports a probable violation of a law or board regulation, the complaint will be processed by the Regulatory Programs & Compliance Division. The complaint may be resolved informally or investigated further. You may be asked to provide additional information.

If the investigation shows probable cause that a violation occurred, (1) the appropriate regulatory board may take action to require remedial education, impose a fine, suspend or revoke the license, or fail to renew a license, **or** (2) criminal action may be taken if the individual or business is not licensed. You may be asked to appear in court or at a disciplinary proceeding to provide testimony for the case.

If the investigation does not show probable cause that a violation occurred, the case will be closed. For more information about the disciplinary process, visit our website at www.dpor.virginia.gov.

In some instances, the Department may offer mediation as a means of alternative dispute resolution regarding complaints against licensees. A regulatory board **CANNOT** require any individual or business to refund money, correct deficiencies, or provide other personal remedies. In some cases, legal action may be your only recourse to resolve a matter. The Department cannot provide legal advice.

In certain cases, you may be eligible to receive funds under the Virginia Contractor/Real Estate Transaction Recovery Acts. For further information, contact the Recovery Fund section at (804) 367-1559, by mail, or visit our website at www.dpor.virginia.gov.

COMPLAINT FORM INSTRUCTIONS

NOTE: The Department cannot guarantee anonymity. By law, all complaints received by the Department are subject to public disclosure once a case is closed. Therefore, if you wish to file a complaint anonymously, please do not submit the complaint electronically. In addition, do not include any personal information on the complaint form or any supplemental documents that reveal your identity. While the Department may accept an anonymous complaint, it will not proceed if it lacks sufficient information to support a regulatory or criminal violation.

- ▶ Fill in your personal information.
- ▶ Fill in the name, address, e-mail address, and telephone number(s) of the person you are filing a complaint against.
- ▶ Provide a description of your complaint on the attached Complaint Form, using additional pages if necessary.
- ▶ Include as many specific details as possible, such as dates, names of persons involved, etc.
- ▶ Send copies of any documents in support of the complaint (e.g. contract, purchase agreement, warranty information, checks, receipts, invoices, photographs, correspondences, etc.). Do **NOT** send originals.
- ▶ Please **NO STAPLES**. We request all documentation be bound with a paper clip or binder clip.
- ▶ **There is a size limit for documents submitted by e-mail. If your attachments exceed 18 MB, a non-delivery receipt will be sent to you. If you exceed the limit, please submit the complaint form and supporting documents to the mailing address below.**
- ▶ Provide your full name and date the complaint form at the bottom of the page.

Submit the complaint form and additional documents to:

Department of Professional & Occupational Regulation
Regulatory Programs & Compliance
Complaint Analysis & Resolution
9960 Mayland Drive, Suite 400
Richmond, Virginia 23233-1485

Email	complaintanalysis@dpor.virginia.gov
Fax	(866) 282-3932
Office Hours	8:15 a.m. – 5:00 p.m.

The Department considers all complaints important. The processing of the complaint will be conducted in as timely a manner as possible. Many complaints, however, present an immediate threat to public safety and will be given priority. Thank you for your patience during the complaint process.



FOR OFFICE USE ONLY
LICENSE NUMBER:
EXPIRATION DATE:
FILE NUMBER:

COMPLAINT FORM

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SECTION I – REQUIRED INFORMATION

COMPLAINT FILED BY

Name _____

Company _____
(Your company name if filing on behalf of a company)

Mailing Address _____

City, State, and Zip _____

Phone Numbers _____
 BUSINESS CELL HOME/OTHER

E-mail Address _____

Address where problem occurred _____

City/County _____

How did you hear about DPOR? Newspaper DPOR publication, speaker, or contact
 TV Referred by _____
 Radio Other _____
 Internet

COMPLAINT AGAINST

Individual Name _____

Company _____

Address _____

City, State, and Zip _____

Phone Numbers _____
 BUSINESS CELL HOME/OTHER

E-mail Address _____

Type of License and/or License Number _____

SECTION II – SUPPORTING DOCUMENTS

To process a Complaint Form, supporting documents are needed, which may include the following:

ALL BOARDS	Copies of all relevant documentation including, but not limited to: contracts, agreements, invoices, receipts, correspondence, and photographs (all pages – front and back)
CONTRACTOR	Copy of contract, Proof of Payment, Building Official Documentation, Notice of Violation
REAL ESTATE	Purchase Contracts, Listing Agreements, Settlement Statements, Cancelled Checks, Disclosure Statements, Management Agreements, Leases
APPRAISER	Copy of Appraisal
LAND SURVEYOR	Copy of Survey
BARBERS & COSMETOLOGY	Copy of Medical Records/Photos re: injuries

SECTION III – COMPLAINT DESCRIPTION

Describe the complaint. If more room is needed, include an additional document with submittal.

I wish to complain about the individual/business named above. I understand that a regulatory board does not have the authority to require a licensee to return money, correct deficiencies, or provide other personal remedies. I further understand that decisions regarding criminal prosecutions are at the discretion of the Department and the Commonwealth’s Attorney. I am submitting this information so that the Department may determine whether disciplinary or criminal action against this individual or business should be considered. I verify under penalty of law that the information provided is true to the best of my knowledge.

Full Name _____ Date _____

SECTION IV – HOW TO SUBMIT THIS FORM

Please return this form one of the following ways

- E-MAIL ➔ * BEFORE SUBMITTING VIA E-MAIL, PLEASE SEE INSTRUCTIONS BELOW
- FAX ➔ (866) 282-3932
- MAIL ➔
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Regulatory Programs & Compliance
Complaint Analysis & Resolution
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Contact Information

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VA RELAY ♦ – 7-1-1
HOTLINE FOR OLDER VIRGINIANS – (804) 367-2178
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WEBSITE – www.dpor.virginia.gov
♦ Virginia Relay enables people who are deaf, hard of hearing, Deaf Blind, or speech disabled to communicate by TTY (text telephone) or another assistive telephone device with anyone who uses a standard phone.

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