

670 Hawthorne Avenue, SE  
Suite 220  
Salem, Oregon 97301

tel. 503.362.2666  
email: [osbeels@osbeels.org](mailto:osbeels@osbeels.org)  
Web: [www.oregon.gov/osbeels](http://www.oregon.gov/osbeels)

## ***Complaint Form Instructions***

Included with these instructions are the following forms: Complaint Form in five sections; Continuation Form for the Complainant Statement; Complainant Exhibits Form; Statement of Witness Form; and Continuation Form for the Witness Statement.

The Complaint Form includes Section I, Complainant. You need to complete this section so we can contact you in the future. Section II is the person you are complaining about, the respondent. Provide as much information as you have available. If you have any witnesses to the events, please provide the information requested in Section III. They will also need to complete and sign the Statement of Witness Form. A Continuation Form should be used if their statement requires additional pages. Under General Information, Section IV, answer each question to the best of your ability. Section V is where you need to describe in detail your complaint. Notice that a checkbox is provided if you need to use the Continuation Form for your complaint or if you submit a Complainant Exhibits Form. Be sure to sign and date your complaint using permanent ink. Any witness statements will also need to be signed and dated. Make copies of the Continuation forms as needed.

All forms are available to be completed on-line and printed for postal mailing. Otherwise, forms can be downloaded and typed or legibly printed using permanent ink. Be sure to save a copy of your complaint.

***Most important is to provide evidence to support your complaint.*** For example, plans, maps, or any other information that you believe evidence your complaint must be submitted with your complaint (2 sets of full size maps or plans must be provided). If submitting photographs, color photos are most preferred. List all included documents on the Complainant Exhibits Form. Do not send originals as they cannot be returned.

Submit the Complaint Form and all supporting documents to:

Oregon State Board of Examiners for Engineering and Land Surveying (OSBEELS)  
670 Hawthorne Avenue, SE  
Suite 220  
Salem, OR 97301

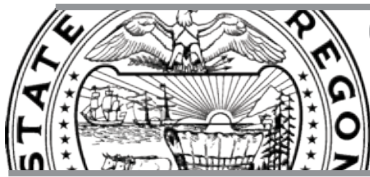
### **GENERAL NOTES**

Complainants may not withdraw their complaint once it is received by OSBEELS. Any information submitted is subject to disclosure under Oregon's Public Records Law.

OSBEELS accepts anonymous complaints. However, circumstances arise when the anonymity of the complainant makes it difficult to proceed to an investigation. For example, if insufficient evidence is provided, there may not be support for allegations against the respondent to result in a penalty or sanction. Therefore, if filing an anonymous complaint, it is important for you to provide clear and specific information in relation to the alleged violation(s) of the respondent.

Once a complaint is received, an OSBEELS investigator will conduct a preliminary review of the complaint to establish that there is sufficient evidence to justify proceeding and that the allegations against the respondent are such that, if proven, would result in a penalty or sanction.

If the complaint is considered valid, OSBEELS will contact the respondent by mail and request written comments. A copy of your complaint is attached for their review. You will be notified regarding the outcome of your complaint.



## Complaint Form

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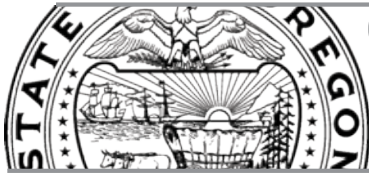
tel. 503.362.2666  
email: [osbeels@osbeels.org](mailto:osbeels@osbeels.org)  
Web: [www.oregon.gov/osbeels](http://www.oregon.gov/osbeels)

If the evidence does not support the allegations, the respondent is not notified and you are notified as to the reason a case was not opened (for example, lack of jurisdiction, insufficient evidence, etc.).

Oregon State laws do not grant OSBEELS authority or jurisdiction over civil matters such as fees charged, contract disputes, or property line ownership disputes.

OSBEELS considers all complaints important. The processing of complaints is conducted in as timely a manner as possible. OSBEELS may determine that some complaints present an immediate threat to the public welfare and are given priority.

Thank you for your patience during the complaint process. If you should have any questions, please contact our office directly.



# Oregon

BOARD OF EXAMINERS  
FOR ENGINEERING &  
LAND SURVEYING

670 Hawthorne Avenue, SE  
Suite 220  
Salem, Oregon 97301

tel. 503.362.2666  
email: [osbeels@osbeels.org](mailto:osbeels@osbeels.org)  
Web: [www.oregon.gov/osbeels](http://www.oregon.gov/osbeels)

Office Use Only - Date Received:

## Complaint Form

### I. Complainant (Person making the complaint)

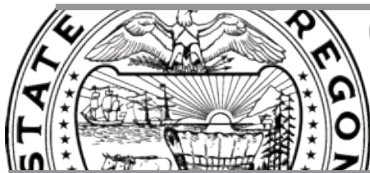
First name (personal name)	Middle name or initial	Last name (family name)	
Mailing address (include any apartment number)			Home/Personal phone #
City	State or Province	Zip/Postal code	Home email address
Business name		Business phone #	Business fax #
Business address (include any suite number)			
City	State or Province	Zip/Postal code	Business email address

Where do you want correspondence mailed to?  Home address **OR**  Business address

### II. Respondent (Person being complained about)

First name (personal name)	Middle name or initial	Last name (family name)	
Mailing address (include any apartment number)			Home/Personal phone #
City	State or Province	Zip/Postal code	Home email address
Business name		Business phone #	Business fax #
Business address (include any suite number)			
City	State or Province	Zip/Postal code	Business email address

Web site address



**III. Witnesses (if any, have each witness complete a Statement of Witness Form)**

Name .....	Phone # .....
Mailing address .....	Email address .....
Name .....	Phone # .....
Mailing address .....	Email address .....

**IV. General Information**

Has there been any attempt to resolve your complaint with the respondent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Did you inform the respondent that you were considering filing a complaint with OSBEELS?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was another professional engineer (PE), professional land surveyor (PLS), registered professional photogrammetrist (RPP), and/or certified water right examiner (CWRE) consulted about these matters?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has any civil action been taken in this matter? (If yes, provide documentation)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has any law enforcement agency been consulted in this matter?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

*If yes, please provide the following details:*

Agency name .....	Case number .....
Contact name .....	Phone # .....

If you answered "yes" to any of the questions above, please provide details.

.....

.....

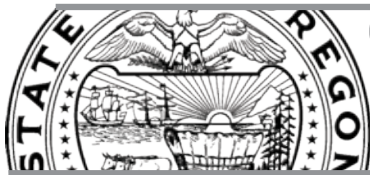
.....

What specific remedy or result are you requesting from OSBEELS?

.....

.....

.....



**V. Complainant Statement**

Be specific. Cite specific violations of statutes and/or rules, if possible. Describe what work the respondent was hired to perform and the problem(s) encountered. Include specific date(s) and details. If possible, include the project location(s) and others that may have been involved, including name(s), address(es), and phone number(s).

Dotted lines for text entry.

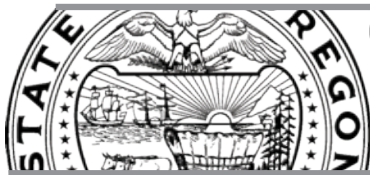
- I've attached a Continuation Form (Complainant)
- I've attached a Complainant Exhibits Form

**VI. Signature**

*I am personally familiar with the facts and circumstances presented. The information contains only the facts and avoids opinions and presents all of the information I believe to be important and/or relevant.*

Signature

Date (Mo/Day/Yr)



**Complaint Form**

***Continuation Form (Complainant)***

*(Additional details of the matter that is the subject of the complaint)*

Complainant name (First name, Middle name, Last name)

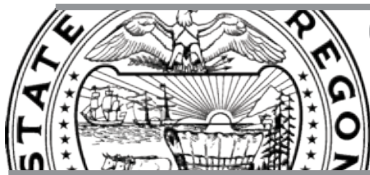
Respondent name (First name, Middle name, Last name)

Please provide additional details. If you need more than one page, you can reprint or copy this page.

Signature

Date (Mo/Day/Yr)





**Complaint Form**

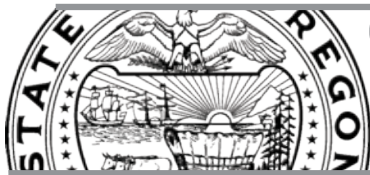
**Statement of Witness Form**

I. Witness (Person who witnessed the Complainant's allegation)			
First name (personal name)	Middle name or initial	Last name (family name)	
Mailing address (include any apartment number)			Home/Personal phone #
City	State or Province	Zip/Postal code	Home email address
Business name		Business phone #	Business fax #
Business address (include any suite number)			
City	State or Province	Zip/Postal code	Business email address

II. Complainant (Person making the complaint)		
First name (personal name)	Middle name or initial	Last name (family name)

III. Respondent (Person being complained about)		
First name (personal name)	Middle name or initial	Last name (family name)
Business name		





**Complaint Form**

**IV. Witness Statement**

Dotted lines for writing the witness statement.

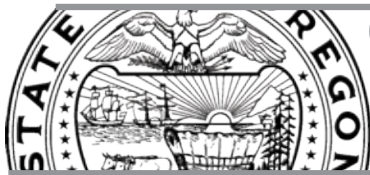
I've attached a Continuation Form (Witness)

**VI. Signature**

*I am personally familiar with the facts and circumstances presented. The information contains only the facts and avoids opinions and presents all of the information I believe to be important and/or relevant.*

Signature

Date (Mo/Day/Yr)



**Continuation Form (Witness)**

*(Additional details of the matter that is the subject of the complaint)*

Complainant name (First name, Middle name, Last name)

Respondent name (First name, Middle name, Last name)

Please provide additional details. If you need more than one page, you can reprint or copy this page.

Signature

Date (Mo/Day/Yr)