

Breach of Contract Complaint Form

for Property Owners and Primary Contractors (Large Commercial)

Before filling out a complaint, you may want to read "Resolving Disputes With Your Contractor." https://www.oregon.gov/CCB/Documents/pdf/resolvingdisputeswithyourcontractor.pdf

You may also want to view the license of the contractor you are filing against and verify that they hold a commercial endorsement. You can do this at <u>www.oregon.gov/CCB</u>

If you are filing against a commercial contractor, you must file a court action or begin arbitration *before* filing a complaint with us.

You must deliver a copy of the court/arbitration filing and a completed CCB complaint form to the CCB and to the contractor's bonding company by certified mail, return receipt requested *within* 90 calendar days after you file the court complaint or begin arbitration *and* at least 30 days *before* a judgment/arbitration award is issued.

You will need certain required documents for your complaint.

- A *Completed* Breach of Contract Complaint form.
- <u>All</u> documentation showing a contractual relationship. (example: copy of the contract, invoices, estimates, front & back copy of checks, etc.)
- A copy of your court/arbitration filing.

We can process your complaint more quickly if you:

- Use only 8 ¹/₂ by 11 size paper. Small items should be taped to blank paper. <u>No</u> staples.
- Send legible copies, not originals and if handwritten, use a black ink pen (not pencil).
- Use white or light paper other colors do not copy well and do <u>not</u> highlight portions of documents.
- Do not submit documents in binders, notebooks, flash drives, or compact discs.
- Do not submit photographs.

Submit your complaint by e-mail at <u>disputes@ccb.oregon.gov</u> or by regular mail to CCB, Attn: Dispute Resolution, PO Box 14140, Salem, OR 97309-5052.

If you need any assistance, either e-mail us at <u>disputes@ccb.oregon.gov</u> or call us at 503-934-2247.

Construction Contractors Board OFFICE DATE STAMP PO Box 14140			THIS SECTION FOR OFFICE USE ONLY File Number		
Salem, OR 97309-505	52		License Dates:		
	CONTRACI er or Primary Con	COMPLAINT ntractor	90 Day Period Lie	cense Type	Complaint Type
1. Person Making Complaint Name:			2. Complaint Against Name:		
Business Name(if Applicable):			Company:		CCB #:
Mailing Address:			Mailing Address:		•
City:	State: Zip Co	ode: County:	City:	State:	Zip Code:
Work Phone:	Home Phone:	Cell Phone:	Phone Numbers with Area Codes	3:	
Email Address:	1		Email Address:		
Are you a licensed contractor? If Yes: CCB License #: Yes No 3. Job Site Address Street:			 5. Nature of Complaint Complaint by Owner Construction Lien Filed Complaint by Primary Contractor against Subcontractor 		
			NOTE: DO NOT USE THIS FORM if you are a subcontractor, material/equipment supplier or an employee.		
City:	State: Zip Co	ode: County:	6. Other Filings (Check □ Another CCB complain		-
4. Contract			CCB File No.(s):		
 Oral (Submit checks & invoices to verify contractual relationship) Written (Complete copy of contract must be attached) 			☐ This issue has been submitted to a court or arbitration for determination or resolution, and the details are attached.		
Contract Date:			7. If you are an Owner	r: Did the contrac	tor give you the
Total Contract Amour	nt: \$		following Notices?		
Total Paid to Contract	tor: \$		Info Notice About Const.I	Liens? □Yes □	No
Date Work Started:			Consumer Protection Noti	ce? □ Yes □	No
Date Contractor Cease			Notice of Procedure?	□ Yes □	No
What work was to be performed under the contract? (Example: build		8. Employees			
house; install a roof)			Were there employees of t construction?	the contractor on the Yes	
For New Home Construction Only			9. Corrections		
Date Structure Compl			Has the work been correct Have you hired another co		□ Yes □ No
Date of Actual Occup		~ · ·	the work?		\Box Yes \Box No
10. Structure Type		Commerical	□Large Commercial		
11. Pre-Complaint	Notice You M	IUST include a copy of the not	ice and proof of certified mailing.	Date Maile	d:

BREACH OF CONTRACT COMPLAINT

Owner or Primary Contractor

Page 2

File Number:

12. Complaint Items				
No.	Briefly List by number, items of improper or negligent work or breaches of contract Example:	Estimated Cost		
	Example:			
1	Bubbling Paint	\$50.00		
2	Roof Leaking	\$200.00		

Note: Please attach pages if you need additional space to list your complaint items.

13. Certification: I certify that this complaint form with all attachments are true, complete, and correct to the best of my knowledge and belief.

Date:

Signature:

NOTE: You MUST sign this document in order for your complaint to be processed.

RETURN ALL PAGES TO CONSTRUCTION CONTRACTORS BOARD DO NOT SEND PROCESSING FEE WITH THIS FORM

FOR OFFICE USE ONLY