



Breach of Contract Complaint Form

for Primary Contractors
(Residential & Small 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 an endorsement. You can do this at www.oregon.gov/CCB

If you are filing against a residential contractor, you must first send the contractor *written* notice (pre-complaint) by *certified* mail that you plan to file a complaint. We *cannot* accept your complaint until 30 days after you have mailed this notice. The law requires only that the notice be mailed, not that the contractor receive it. You can use the CCB notice at: https://www.ccb.state.or.us/PreClaim/preclaim_notice.htm

The pre-complaint notice you send to the contractor must have all of the following information in it.

1. Date
2. Contractor’s Name
3. Contractor’s Address - This must be the address shown in the CCB licensing record. You can get this from our website at www.oregon.gov/CCB or by calling us at 503-378-4621.
4. Your letter must state that you intend or plan to file a complaint with the CCB.
5. Your name must be on the letter.

You will need certain required documents for your complaint.

- A *Completed* Breach of Contract Complaint form.
- A copy of the pre-complaint notice sent to the contractor.
- A copy of the post office receipt showing that you sent the notice by certified mail.
- All documentation showing a contractual relationship. (example: copy of the contract, invoices, estimates, front & back copy of checks, etc.)

We can process your complaint more quickly if you:

- Use only 8 ½ by 11 size paper. Small items should be taped to blank paper. No 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 not highlight portions of documents.
- Do not submit documents in binders, notebooks, flash drives, or compact discs.
- Do not submit photographs.
- Your complaint must be **received** by the CCB on work involving a **new** structure:
 - Within 14 months from the date the structure was first occupied or two years after substantial completion of the structure, whichever is earlier.
- Your complaint must be **received** by the CCB on work involving an **existing** structure:
 - Within 14 months from the date the contractor substantially completed the work.

Submit your complaint by fax at 503-373-2007, by e-mail at disputes@ccb.oregon.gov or by regular mail to CCB, Attn: Dispute Resolution, PO Box 14140, Salem, OR 97309-5052. If sending by regular mail, please send the complaint at least two weeks before the deadline to ensure timely receipt.

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

Construction Contractors Board OFFICE DATE STAMP
 PO Box 14140
 Salem, OR 97309-5052

THIS SECTION FOR OFFICE USE ONLY		
File Number		
License Dates:		
90 Day Period	License Type	Complaint Type

BREACH OF CONTRACT COMPLAINT
 Primary Contractor

1. Person Making Complaint Name:			2. Complaint Against Name:		
Business Name(if Applicable):			Company:		CCB #:
Mailing Address:			Mailing Address:		
City:	State:	Zip Code:	County:	City:	State:
				Zip Code:	
Work Phone:	Home Phone:	Cell Phone:		Phone Numbers with Area Codes:	
Email Address:			Email Address:		
Are you a licensed contractor? <input type="checkbox"/> Yes <input type="checkbox"/> No			If Yes: CCB License #:		
3. Job Site Address Street:			5. Nature of Complaint <input type="checkbox"/> Complaint by Owner <input type="checkbox"/> Construction Lien Filed <input type="checkbox"/> 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 Code:	County:		
4. Contract <input type="checkbox"/> Oral (Submit checks & invoices to verify contractual relationship) <input type="checkbox"/> Written (Complete copy of contract must be attached)			6. Other Filings (Check only the boxes that apply) <input type="checkbox"/> Another CCB complaint has been filed regarding this property. CCB File No.(s): _____ <input type="checkbox"/> 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: Did the contractor give you the following Notices?		
Total Contract Amount: \$ _____			Info Notice About Const.Liens? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Total Paid to Contractor: \$ _____			Consumer Protection Notice? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date Work Started: _____			Notice of Procedure? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Date Contractor Ceased Work: _____			8. Employees Were there employees of the contractor on the job during construction? <input type="checkbox"/> Yes <input type="checkbox"/> No		
What work was to be performed under the contract? (Example: build house; install a roof)			9. Corrections Has the work been corrected at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you hired another contractor to correct the work? <input type="checkbox"/> Yes <input type="checkbox"/> No		
For New Home Construction Only					
Date Structure Completed:					
Date of Actual Occupancy:					
10. Structure Type <input type="checkbox"/> Residential <input type="checkbox"/> Small Commercial					
11. Pre-Complaint Notice You MUST include a copy of the notice and proof of certified mailing.			Date Mailed: _____		

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

BREACH OF CONTRACT COMPLAINT

Owner or Primary Contractor _____

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File Number: _____

12. Complaint Items

No.	Briefly List by number, items of improper or negligent work or breaches of contract	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.