



Lawson Lamar
State Attorney

Orange County
Consumer Fraud Unit

415 North Orange Avenue
Post Office Box 1673
Orlando, Florida 32802
407-836-2490



Richard T. Crotty
Orange County
Mayor

Carlos J. Morales
Consumer Investigator
Supervisor

Dear Consumer

Thank you for contacting us. We are enclosing a complaint form for you to complete and return to us. To prevent delay in the processing of your complaint, please make sure to enclose the **original notarized form** and copies of all documents or papers that apply to your dispute.

The Orange County Consumer Fraud Unit is tasked with the investigation of consumer complaints. In this capacity we provide two basic services for consumers. First, we attempt to mediate consumer complaints through informal contact with the parties involved. Secondly, we investigate complaints to gather evidence of violations of Florida Statutes for criminal prosecution by the State Attorney's Office.

By law, we cannot require a business to resolve your dispute. Our goal with mediation is to encourage informal solutions to consumer disputes. To that end, we will make the business aware of your dispute and attempt to mediate a solution whenever possible.

We cannot act as your private attorney. Our investigators are not attorneys and cannot give legal advice or opinions. If you feel you need legal advice, you will need to consult with a private attorney, legal aid society or other organizations.

Sincerely,

Orange County
Consumer Fraud Unit

Important: Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082, s. 775.083 or s. 837.06, Florida Statutes.

Please explain your complaint fully. The following information should be included in your narrative statement but do not restrict your statement to only these areas.

1. What is the name of the company and/or person you have a complaint about?
2. How did you become aware of this individual or company?
3. Did you enter into a written agreement? When? (Attach copies)
4. Were you present when the agreement was signed? Where was it signed?
5. At the time you entered into the agreement did you believe the person/company was a contractor licensed by the State of Florida and/or possessed a Local Business Tax (formerly known as Occupational License) issued by Orange County? What was said, done, written or shown to you, which caused you to believe they were licensed?
6. What work was supposed to be done under the terms of the contract and where was that work to be performed?
7. Did you make any payments? If so, list the date, amount and method of payment. Was money paid to the contractor prior to the work beginning; if so, how much? (Attach copies of the front and back of all checks or receipts.)
8. Were any representations made about how those funds would be used? Please specify.
9. To your knowledge were building permits obtained? Who obtained them?
10. Was there any discussion that the person/company was affiliated with another person or company that was licensed or certified? Did they use the term "qualified or qualifier"?
11. Were additional contracts/agreements entered into with the same contractor? Explain.
12. Did the contractor begin the work? When?
13. Describe the work performed by the contractor.
14. When was the last time the contractor performed any work on your property?
15. Have you had any discussion with them since then? What was said?
16. Have there been any inspections made of the work performed? If so, what types of inspections and what were the results? (Applies only to structural/electrical/plumbing)
17. Did you obtain a (partial or full) release of lien from your contractor? (attach copy)
18. Have any suppliers, material men, subcontractors or anyone else threatened to or actually placed liens on your property. If so, please list their names, addresses, telephone numbers and amount of liens. (Attach copies of all notices or claims of liens)
19. Please explain why you are dissatisfied and/or feel you have been a victim of a fraud or theft.
20. Please describe what the contractor looks like.
21. Is there any other information that we should know?
22. Are you willing to prosecute?
23. Please list any other witnesses.

CASE NO: _____

Orange County, Florida - Board of County Commissioners

Construction Complaint Form

Mail completed form and all attachments (receipts, contracts, licenses, permits, etc.) to:

Orange County Consumer Fraud

P.O. Box 1673

415 N Orange Avenue

PH: 407-836-2490

Orlando, FL 32802

(Please print or type)

Your name: _____

Your mailing address: _____

City: _____ State: _____ Zip code: _____

Day time phone: (_____) _____ Alternate phone: (_____) _____

Your e-mail address: _____

Business or Person Complaint is Against:

Name: _____

Mailing address: _____

Physical address if different: _____ [] Same

City: _____ State: _____ Zip code: _____

Contact person: _____

Phone: (_____) _____ Fax: (_____) _____

E-Mail Address: _____ Website: _____

Dispute Information:

Job Site Address: _____

Type of Complaint: _____

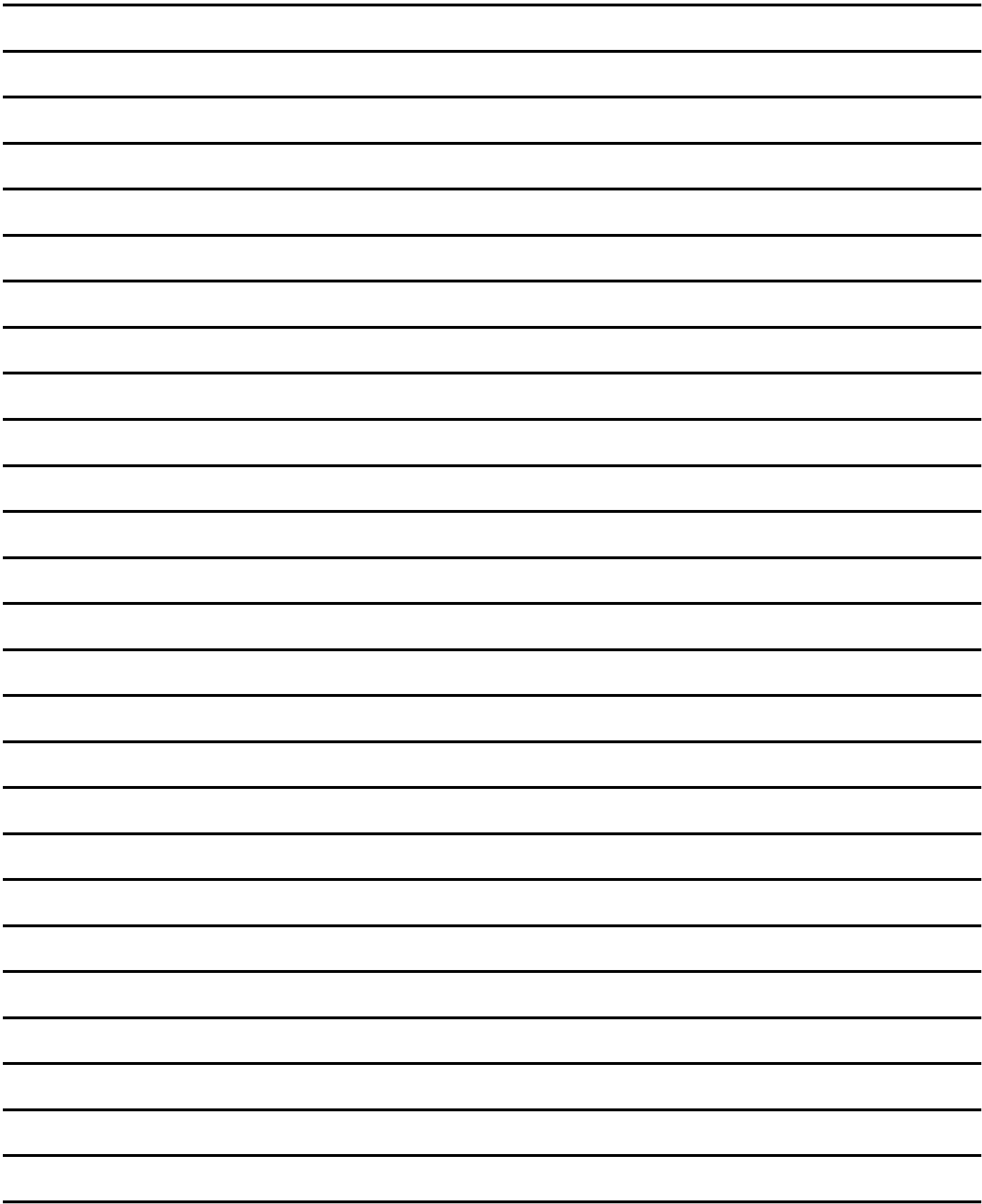
Did you sign a contract? _____ When? _____

What was to be done? _____ Was it completed? _____

Percentage completed: _____ Date the work stopped: _____

Did the contractor indicate he/she was licensed? _____ What type? _____

License number, if provided: _____



PLEASE READ THE FOLLOWING DISCLOSURE STATEMENT

Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082, s.775.083 or s.837.06, Florida Statutes.

All documents and attachments submitted with this dispute are subject to public inspection pursuant to Chapter 119, Florida Statutes. **Please do not include Social Security numbers, bank/credit card account numbers or medical records with your information (unless specifically requested).** If we begin an investigation, a copy of your complaint will be mailed to the person or business you are complaining about unless you indicate otherwise.

 I am filing this complaint for information only. I understand that no investigation will be initiated - do not forward it to business.

I hereby certify that I have read this disclosure statement and that the information submitted on this complaint form and in the attached documents are true and complete to the best of my knowledge and belief.

(Signature of complainant and date)

SIGN IN FRONT OF NOTARY

State of Florida, County of _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____,

20____ by _____.

Notary Public

 Personally known to me

 Produced identification

Type of identification: _____

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If you have a dispute: Please be sure you have made an effort to resolve the matter by dealing directly with the manager or owner of the business. If you have exhausted all attempts to resolve the matter, complete this form and return it to our office. We are not attorneys and cannot represent you legally. We will contact the business and notify you of our findings.

Orange County Consumer Fraud Unit

www.orangecountyfl.net

415 N Orange Avenue

P.O. Box 1673

Orlando, FL 32802

PH: (407) 836-2490 FAX: (407) 836-1210

Email: fraudhelp@sao9.org