



Nebraska State Board of Landscape Architects

Mail to: PO Box 95165
Lincoln, NE 68509-4844

Delivery: 215 Centennial Mall S, Suite 400
Lincoln, NE 68508-1813

Phone: 402-471-2404
Fax: 402-471-0787

Questions? Contact us at nsbla.board@nebraska.gov or on the web at nsbla.nebraska.gov

COMPLAINT FORM

- Mail this form and all supporting documentation to the Board.
- Include copies of ALL DOCUMENTS, including plans, letters, contracts, agreements, invoices, receipts, correspondence, photographs, etc. Do not send original documents. Attach extra pages if required – be as complete and thorough as possible.

1. RESPONDENT (The person against whom the complaint is being made):

_____ Name	_____ License Number (if known)
_____ Company	_____ Phone
_____ Address	_____ Fax
_____ Email	_____ Other Information

2. COMPLAINANT (The person making the complaint):

_____ Name	_____ Phone
_____ Address	_____ Fax
_____ Phone	_____ Email
_____ Best time to contact you	

3. PROJECT ADDRESS (if applicable):

_____ Street	
_____ City	_____ Parcel No (if known)

- | | | |
|---|-----------|----------|
| 4. Do you have design plans prepared by the Respondent? | _____ Yes | _____ No |
| 6. Did you and the Respondent sign a written contract, letter, or agreement? | _____ Yes | _____ No |
| 7. Did you try to resolve this complaint with the Respondent? | _____ Yes | _____ No |
| 8. Did the Respondent respond? <i>Explain (use additional sheets if needed)</i> | _____ Yes | _____ No |

Board Use Only



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9. DESCRIBE YOUR COMPLAINT. *Be specific. What happened? Who else is involved, including city or county agencies/officials (names, addresses, phone numbers), location of evidence? Give dates and details.*

By signing below, I declare that the information contained in this complaint, including any attached pages, is true and correct to the best of my knowledge and belief.

Signature (must be signed to initiate an investigation)

Date