

Fax (702) 382-6642 TDD (702) 386-9108 E-mail us at license@lasvegasnevada.gov

## **Report of Unlicensed Business Activity**

All complaints must be submitted in writing. Be as complete as possible. For complaints about performance or quality of work or to enforce a contractual arrangement through small claims court, please see the list of regulatory and enforcement agencies on our website at www. LasVegasNevada.gov

Please type or print legibly.

Information about the Offending Business Activ	vity
Name of the offending business:	
Street address of the offending business:	
Name of business owner or contact person you d	lealt with:
Offender's business phone:	
Describe the activity:	
Explain how you found the company, product or	service. If you have advertisements, business cards or flyers, attach copies
What is the exact nature of your complaint? If yo	ou have a written contract, receipts or other documents, attach copies.
Please proved your contact information below.	
Name:	
Street Address:	
City, State & Zip Code:	
Contact Phone:	Alternate Phone #:
E-mail Address:	
Name of YOUR business, if applicable:	

Complaint Form - Form BL006 09/04/2012

List any witnesses or other individu	uals who may have observed this activity	y:	
Have you contacted or filed comple	aints with any other agencies? Yes	☐ No	Is so, please list below.
pereby affirm that I am 18 years of a port are true.	ge or older, that I have personal knowle	edge of the m	natter stated herein and that the statements in this
rinted Name:			
oday's Date:			
onature:			

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