



REQUEST TO REVIEW A CONTRACTOR'S PERFORMANCE

COMPLAINANT'S INFORMATION:

Name: _____
Tel #: _____ Fax#: _____
Address: _____
City: _____ State: _____ Zip: _____

CONTRACTOR'S INFORMATION:

Contractor: _____ Tel #: _____

BACKGROUND INFORMATION:

Do you owe the contractor any money? Yes No If yes, amount \$_____

Have you retained legal counsel regarding your complaint? Yes No

If so, what is the name of the law firm? _____

Date job was started ___/___/___ Date job was completed ___/___/___ not complete

What is the nature of the complaint? Please be as specific as possible (use back if necessary)

Have you ever contacted this contractor regarding your complaint? Yes No
Contractor's response: (use back if necessary)

What adjustment do you consider mutually fair (use back if necessary)

In signing this form, I understand that the investigation requested is a non-charge conciliatory procedure and agree to hold the National Association of the Remodeling Industry harmless from any involvement in any legal action resulting from this complaint.

Signature: _____ Date: _____

Return form to: Miami Valley NARI
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(937) 222-NARI • Fax: (937) 222-5794
dayton@naripro.org • www.naridayton.org