

CITY OF BUFFALO COMPLAINT AFFIDAVIT

Office of Licenses City Hall Room 301
65 Niagara Square Buffalo, NY 14202
Phone: 716-851-4078

You are advised to first attempt to resolve your complaint and keep a log of all telephone calls and copies of any pertinent documents. If this business/person does not respond, you are advised to file your complaint with us.

The Office of Licenses will not act as a private attorney, but instead represent the public in enforcing laws designed to protect the public from misleading or unlawful business practices. If you have questions concerning your legal rights or responsibilities, you may contact a private attorney.

In addition to filing a complaint with the Office of Licenses, you may file a complaint with one of these agencies.

Buffalo Small Claims Court 716.845.2663 State Attorney General 716-853-8400 Better Business Bureau 716-881-5222

Provide the following information.

Clearly print or type your answers. It is important that the information you provide is thorough and clear.

Your name _____

Your address _____

Contact information: phone _____ **/email** _____

Business Name/Owner complaint is against _____

Business Address _____

Address site for complaint _____

1. If this is concerning a contractor, type of work performed _____

2. Cost of estimate for work _____ amount paid to date _____

3. Is this complaint against someone licensed in the City of Buffalo? yes no

4. What type of License do they hold? _____

5. Was any work contracted through a loan obtained with BURA or an affiliated agency? yes no

6. If complaint is against a contractor, does the contractor have a lien against your home? yes no

7. Has a decision already been reached in Small Claims Court or another meditative agency? yes no

8. Did you attempt to resolve this complaint with the business/person? yes no

If No, please explain why not. _____

9. **Describe your complaint on the reverse side of this form.**

Include supporting documentation.

- Copy of contract** with signatures, if applicable
- Photos** of work performed (required)
- Proof of payment** (receipts, canceled checks)
- Copy** of warranty, if applicable
- Copy** of correspondence, if any
- Other** related documents

Print name _____

Signature _____

Date _____

Mail this form and related documents to the above address

