

## **TEXAS BOARD OF PROFESSIONAL GEOSCIENTISTS**

P.O. Box 13225 • Austin, Texas 78711 • (512) 936-4400 • fax (512) 936-4409 Website: www.tbpg.state.tx.us

## COMPLAINT FORM

To make a formal complaint against a licensed geoscientist or member of the public, and/or public or private entity, or to report possible violations of the Texas Geoscience Practice Act, please fill out this form in its entirety and submit to:

Texas Board of Professional Geoscientists Attn: Compliance Department P.O. Box 13225 Austin, Texas 78711

Date:
Complaint is against: Firm or business entity  Individual
Name of entity or individual that complaint is being filed against:  Is this entity or individual licensed?
Complaint Submitted by:  Contact Information: Phone Number: Fax Number:  Address: Home Business  E-mail Address:
1. I,, hereby submit the following complaint for consideration of disciplinary action by the Board in accordance with §§1002.154, 1002.203, 1002.204, and 1002.205 of the Texas Geoscience Practice Act. I am personally familiar with the facts and circumstances hereinafter presented and the impropriety of this matter suggests gross negligence, incompetence, or misconduct in the practice of professional geoscience. Because this matter affects the public's health, safety and welfare, I am filing this complaint against the above-cited person(s), entity or entities believing that their activities and/or conduct may be in violation of the Act or Board rules. I understand that the cited person(s), entity or entities will be furnished with a copy of this complaint for the purpose of response/rebuttal.
2. It is my contention that the cited person(s), entity or entities should be held accountable to the public through the authority of the Board for the following conduct, the details of which I am providing to show reasonable cause why the Board should investigate and act:



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For office use only:  Date received:	Investigated by:	Investigation Start Date:	Investigation End Date:	Attach findings	
My term expires o	n, 20	·			
Signature of Notar	ry Public				
	_	day of	, 20		
Printed name of C	omplainant	Signa	ature of Complainant	Notary Seal Here	
before the Board v 10 business days o	will consider this comp of my initial complaint	leted in its entirety and all laint. I also understand that then my complaint will be o	if the evidence and exhib dismissed.		
(Use additional s	theets if necessary)				
5. The nature and	details of my specific c	omplaint are:			
testimony should l	be considered by the Bo	pard in determining its final	disposition of this matter.		
available) of all	other persons who hav	ve direct interest or posses	ss pertinent information is	n this matter, and whose	
4. I have also incl	uded a list containing t	the names, business addres	ses and telephone number	rs and e-mail addresses (in	
		with this complaint			
		parately from this complain	•		
		512-936-4409 ATTN: Com			
	<u>`</u>	nd sent electronically to co	mnliance@thng state tx us	3	
manner:	on in evaluating this complaint. The exhibits themselves will be submitted to the Board in the following  (Please check the appropriate box)				
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