Arkansas Home Inspector Registration Board

900 W. Capitol Ave. Ste. 400
Little Rock, AR 72201
PH: (501) 683-3710
EMAIL: ahib@arkansas.gov - WEBSITE: www.ahirb.org

Complaint Regarding A Person Holding Himself Out As A Home Inspector Who Is Not Believed To Be Properly Registered

A. Person Filing This Complaint:

Name (Print) : _____

Address: _____ Telephone: (_____) _____

City: _____ State: ____ Zip Code:_____ eMail Address: _____

❑ A personal complaint ❑ Complaint from a public official (Office: _____)

B. Person Against Whom Complaint Is Lodged: (Include all known information. If not known, enter "Unknown")

Name (Print) : _____

Address: _____ Telephone: (_____) _____

City: _____ State: ____ Zip Code:_____ eMail Address: _____

Company and address: _____

City: _____ State: ____ Zip Code:_____ eMail Address: _____

How did you learn about this inspector? ***Please Circle One***: Website Search Real Estate Agent Family Friend Other

If by website, please list the website address: _____

If by referral, please list their name and phone number: _____

C. Your Complaint: Include all facts as known to you. If you have received information from other persons, include their names, Addresses, telephone numbers, and email address. Add additional sheets, if needed to provide complete information.

_____

_____

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_____

_____

I swear and affirm that the information provided above is true and accurate to the best of my knowledge.

_____ Date _____
(Person filling complaint)

Affidavit: Apply Seal Below

State of _____County of _____

Subscribed and sworn to before me, a Notary Public, this _____ day

of _____, 20___. My commission expires: _____

Signature of Notary Public: _____