



LOUISIANA STATE UNIFORM CONSTRUCTION CODE COUNCIL

8181 Independence Boulevard

Baton Rouge, Louisiana 70806

Phone (225)922-0817

Email To LSUCCC Administrator: mark.joiner@la.gov

COMPLAINT REPORTING FORM

(PLEASE PRINT)

You can mail or email complaint to the above addresses

Date: _____

Complainant's Name: _____
Last Name First Name MI

Address: _____
P.O. Box or Street

City State Zip

Telephone Numbers: _____
Home Business or Other

Complaint Against: _____
Name of Organization or Individual

Location of Project: _____
Address City State Zip

Complaint Description:

Note: Please provide specific code section violations. All information provided must be complete or complaint may be considered invalid. Attach additional information to the form if more space is needed.

I hereby swear and attest the information contained herein was provided by me and is true and accurate to the best of my knowledge.

Signature of Complainant Date

OFFICE USE ONLY
Complaint No: _____
Action Taken: _____
Date Received: _____ Received By: _____