

COMPLAINT FORM

Ulster County Electrical Licensing Board

313 Shamrock Lane

Kingston, NY 12401

Email: elb@co.ulster.ny.us

Date:

Complainant name and address: _____

Business Name: _____

Phone: _____ Email address _____

Complainant Signature (required): _____

Property address where work is being done and date of alleged incident:

Complaint:

Please complete form and return to the address listed above