



Mississippi State Board of Registered Professional Geologists

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Jackson, Mississippi 39225-2742
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geology@msbrpg.state.ms.us

<http://www.msbrpg.state.ms.us>

Rick L. Ericksen, Executive Director

Dear Sir or Madam:

You recently contacted the Board's office/web site concerning a complaint you have against a Registered Professional Geologist. We have prepared this packet to assist you in your consideration of that action.

The Board is authorized and obligated by state law to regulate the practice of geology in the state of Mississippi. Please complete the enclosed form and submit it to the Board office.

Respectfully,

Rick L. Ericksen, RPG, CPG
Executive Director

MISSISSIPPI STATE BOARD OF REGISTERED
PROFESSIONAL GEOLOGISTS

PO BOX 22742
JACKSON, MS 39225-2742

COMPLAINT FORM

BOARD OFFICE USE ONLY - DO NOT ENTER INFORMATION HERE

COMPLAINT NUMBER: 20 __ - ____

Date Complaint Filed: _____

Initial Review by: _____
Board Member Name

Initial Recommendation: _____

Board Recommendation: _____

Disposition of Complaint: _____

1. Complaint:

I, _____
(Name)

(Address)

Telephone Numbers: *(Home)* _____

(Work) _____

wish to file a complaint against: _____

2. Name of Subject:

(Name)

(Address)

Telephone Numbers:

(Home)

(Work)

3. The individual is:

_____ Registered Professional Geologist - Reg. No. _____ (if known)

_____ Unlicensed

4. My complaint is regarding:

_____ Service _____ Unlicensed Practice

_____ An issue, incident or violation or the statute of rules:

MS Law Section 73-63- _____

Rule Number _____

Other (explain): _____

5. Details of Complaint: (Please complete where applicable)

Date of Transaction: _____

Amount involved: \$ _____

Did you make a complaint to the individual involved? _____

How? _____ Telephone Date(s): _____

_____ Regular Mail Date(s): _____

_____ Certified Mail Date(s): _____

Person(s) you complained to:

How you entered into litigation regarding this matter? _____

Do you anticipate litigation regarding this matter? _____

May we forward a copy of this form to the subject of the complaint? _____

(Please indicate yes or no and initial response)

6. Briefly describe your complaint, attach additional, numbered and signed sheets if necessary:

7. List supportive documents, including copies of court orders, receipts, canceled checks, maps (including title block or seal) etc.

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____
- f. _____
- g. _____

(Documents received will not be returned)

8. List the names and addresses of all other known parties who have a direct interest or possess pertinent information in this matter, whose testimony should be considered by the Board in determining its final disposition of this complaint:

In review of the above, I respectfully request that the Board accept this complaint as a matter within its jurisdiction and responsibility.

In affixing my signature to this complaint, I warrant that all statements made herein and on the appended sheets are true and correct to the best of my knowledge, information, and belief.

Date: _____, 20____.

Signature: _____

"State of _____

County/Parish of _____

Personally appeared before me, the undersigned authority in and for the said county/parish and state, within my jurisdiction, the within named _____, who acknowledged that (he)(she)(they) has (have) sworn to, subscribed to, and executed, the above and foregoing instrument on this _____ day of _____, 20____.

Notary Public

My commission expires:

_____ "

(Affix official seal, if applicable)