

Filing a Complaint

The Bureau of Construction Codes (BCC), Enforcement Section (ES) does not have jurisdiction over contractual, monetary, or warranty issues, nor does BCC have authority to conduct criminal prosecution.

Filing a complaint with BCC is not your only option. Some disputes are best resolved informally between the consumer and the person or company whom you have a complaint with formally through the courts, or by other agencies.

BCC has authority to review and investigate complaints against Residential Builders, Maintenance & Alteration Contractors, electricians, mechanical contractors, plumbers, boiler and elevator licensees, mobile home parks, mobile home retailers, local governmental code enforcing agencies, and alleged non-compliance to Barrier Free Design requirements. Note: BCC can only take action for violations specified in the Occupational Code, Skilled Trades Regulation Act, and Administrative Rules.

If code activities for your unit of government are enforced at the local or county level, you should first contact the local enforcing agency to see if the matter can be resolved with them *before* submitting a complaint to the state. Complaints received by BCC where a local code enforcing agency has jurisdiction over the allegations described in the complaint may be forwarded to the local jurisdiction.

For each of the construction code disciplines (building, electrical, mechanical, and plumbing) there are three levels of jurisdiction (state, county, local). The bureau's Statewide Jurisdiction List shows the enforcing agency for all units of government in Michigan. This list is located on www.michigan.gov/bcc under "Forms & Publications".

- **LOCAL** (city, township, or village): the unit of government has their own code enforcement program.
- **COUNTY**: the unit of government receives code enforcement services from a county enforcing agency.
- **STATE**: the Bureau of Construction Codes is responsible for code enforcement in that unit of government.

BCC must receive residential building complaints no later than 18-months after completion, occupancy, or purchase, whichever occurs latest. With regards to projects requiring an occupancy permit, the 18-months ends with the latest of either issuance of a temporary certificate of occupancy, a certificate of occupancy, or closing. Include appropriate documentation to reflect completion or last date of work performed, occupancy, closing, or purchase, as applicable. Complaint against a skilled trade must be received no later than 12-months after last day at jobsite, final approval from the inspector, or payment or partial payment tendered.

KEEP COPIES OF ALL DOCUMENTS SENT TO THE BUREAU.

To file a complaint, the following information should be submitted.

- A completed, signed Statement of Complaint form, in which is fully described the factual basis for the allegation. This form is located on www.michigan.gov/bcc under "Complaints".
- Copies of any correspondence sent or provided to the person or company whom you have a complaint with.
- Copies of any written response received from the person or company whom you have a complaint with. If only a verbal response was received, notice of who was spoken to, response received and date of communication.
- Copies of any documents which support the allegations which may include, but are not limited to:
 - Complete Contracts/Price Quotes/Estimates/Change Orders
 - Proof of payment (canceled check, receipt, closing statement)
 - Permit and inspection records from the local unit of government
 - Advertisements
 - Notes you have taken
 - Clear photographs showing the alleged violation and the date the photos were taken
 - Court documents if applicable
 - Other relevant documents

You must provide relevant documentation to substantiate your complaint. If you fail to provide documentation to substantiate your complaint, your complaint will be closed with no action taken.

Information will be released to who the complaint is against, therefore, information such as a social security number or other personal information, should not be included. Do not send bulky material.

Please mail the completed form and all documents to the following address or email:

Michigan Department of Licensing and Regulatory Affairs
Bureau of Construction Codes/Enforcement Section
P.O. Box 30254, Lansing, Michigan 48909
email: LARA-BCC-Compliance@michigan.gov

Statement of Complaint

Michigan Department of Licensing and Regulatory Affairs
Bureau of Construction Codes/Enforcement Section
PO Box 30254, Lansing, MI 48909
517-241-9309

LARA-BCC-Compliance@michigan.gov

Authority: 1980 PA 299, MCL 339.101 *et seq.*, 1972 PA 230, 2016 PA 407,
1976 PA 333, 1967 PA 227, 1987 PA 96
Penalty: Failure to provide the information may result in denial of your request.

LARA is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.

Please read the form in its entirety before completing. Type or print legibly in ink.

The Department has jurisdiction in only certain matters involving the individual/business the complaint is against. If the Department has jurisdiction over your complaint, an investigation will be conducted for possible licensing action by the Department.

The Department must receive residential building complaints no later than 18-months after completion, occupancy, or purchase, whichever occurs latest. With regards to projects requiring an occupancy permit, the 18-months ends with the latest of either issuance of a temporary certificate of occupancy, a certificate of occupancy, or closing. Include appropriate documentation to reflect completion or last date of work performed, occupancy, closing, or purchase, as applicable. Complaint against a skilled trade must be received no later than 12-months after last day at jobsite, final approval from the inspector, or payment or partial payment tendered.

NOTE: The Bureau is limited in its scope of authority.

- We do not act as a court of law, we cannot order that monies be refunded, contracts be canceled, etc.
- We do not provide legal advice.
- We do not act in matters involving business practices.
- We do not return copies of documents, pictures, and plans.

It is suggested you first contact the person or company about whom you have a complaint to see if a settlement can be reached. If this is unsuccessful, you may want to consult an attorney to determine your civil options, file an action in Small Claims Court, or contact your local law enforcement. Your individual remedies should be pursued in the civil courts. This may be done in conjunction with, or in lieu of, filing a complaint with this Department.

THIS COMPLAINT RELATES TO THE FOLLOWING:

- | | | |
|--|---|--|
| <input type="checkbox"/> Electrical Licensee | <input type="checkbox"/> Mechanical Licensee | <input type="checkbox"/> Boiler Licensee |
| <input type="checkbox"/> Plumbing Licensee | <input type="checkbox"/> Elevator Licensee | <input type="checkbox"/> Barrier Free |
| <input type="checkbox"/> Mobile Home Retailer | <input type="checkbox"/> Mobile Home Installer/Repairer | <input type="checkbox"/> Mobile Home Park |
| <input type="checkbox"/> Local Government | <input type="checkbox"/> Inspector/Plan Reviewer | <input type="checkbox"/> Building Official |
| <input type="checkbox"/> Individual Residential Builder | <input type="checkbox"/> Residential Builder Company | <input type="checkbox"/> Salesperson |
| <input type="checkbox"/> Residential Maintenance & Alteration Contractor <input type="checkbox"/> Residential Maintenance & Alteration Company | | |

I. Complainant Information (information about you)

YOUR NAME: (Last, First, Middle Initial)	E-MAIL ADDRESS:		
YOUR STREET ADDRESS:	CITY:	STATE:	ZIP CODE:
COUNTY:	TELEPHONE NUMBER (Include Area Code):		
Are you willing to testify in a hearing? <input type="checkbox"/> Yes <input type="checkbox"/> No	Preferred Method of Contact: <input type="checkbox"/> E-Mail <input type="checkbox"/> Regular Mail- recommended for larger-sized responses		

II. Complaint Information (who the complaint is against)

NAME OF BUSINESS OR INDIVIDUAL LICENSEE COMPLAINT IS REGARDING:		LICENSE NUMBER (If known):	
NAME OF THE PERSON YOU DEALT WITH / CONTACT PERSON:	TELEPHONE NUMBER (Include Area Code):	COUNTY:	
STREET ADDRESS:	CITY:	STATE:	ZIP CODE:

Have you contacted the above-named business or individual regarding your complaint? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what was the result? (Please provide copies of any documents related to the above contact)

III. Code Enforcement Information

Have you contacted the local unit of government responsible for code enforcement? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, what was the result?		
NAME OF THE CODE OFFICIAL:	NAME OF LOCAL JURISDICTION:	
Did you file a claim with any other state or local agency? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", list agency(ies). (Attach additional sheets if necessary)		
Have you started legal action? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, where?	Case Number:	Current Status of Claim:
Briefly explain how you would like to see this complaint resolved:		

IV. Details of Complaint - Briefly explain your complaint, include pictures and/or documents as necessary.

Note: Originals will not be returned. Attach additional sheets if necessary to clearly document the violations you believe have occurred.

LAST DATE OF WORK PERFORMED:	HAS THE PHYSICAL EVIDENCE BEEN PRESERVED(if applicable) <input type="checkbox"/> Yes <input type="checkbox"/> NO
EXPLANATION OF COMPLAINT:	

V. Attachments Supporting Complaint – You must provide relevant documentation to substantiate your complaint.

Note: If you fail to provide documentation to substantiate your complaint, your complaint will be closed with no action taken.

<input type="checkbox"/> Complete Contracts/Price Quotes/Estimates/Change Orders	<input type="checkbox"/> Advertisements
<input type="checkbox"/> Proof of payment (cancelled check, receipt, closing statement)	<input type="checkbox"/> Notes you have taken
<input type="checkbox"/> Permit and Inspection Records from the local unit of government	<input type="checkbox"/> Other relevant documents
<input type="checkbox"/> Clear Photographs showing the alleged violation and the date the photos were taken	
<input type="checkbox"/> Court documents if applicable	

I understand this form is a public record under 1976 PA 442, the Freedom of Information Act, and that the Department may be sending a copy of this complaint to the person/company complained against.

SIGNATURE

DATE