



CITY OF CHICAGO
 DEPARTMENT OF BUSINESS AFFAIRS AND
 CONSUMER PROTECTION
 PUBLIC VEHICLE OPERATIONS FACILITY
 2350 WEST OGDEN, FIRST FLOOR
 CHICAGO, IL 60608

Tel: 312.746.4300
 Fax: 312.746.9406
 Chicago.gov/bacp

OFFICE USE:
 Date Received: _____
 Processed By: _____
 CSR#: _____

PUBLIC VEHICLE INDUSTRY INVESTIGATION FORM

INSTRUCTIONS

- Please complete **ALL** information requested below. Failure to do so may result in a delay or rejection of your complaint.
- After completing, please sign and date the form. If your complaint is not legible or is not signed, your complaint will not be processed.
- If action is taken as a result of your complaint, you will be notified.

YOUR INFORMATION

NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

DAYTIME TELEPHONE NO. _____ EVENING TELEPHONE NO. _____ E-MAIL _____

INFORMATION REGARDING THE BUSINESS OR PERSON YOU ARE REPORTING

TYPE OF BUSINESS (check box): Medallion Owner Affiliation License Manager/Broker Radio Dispatcher Other

NAME OF BUSINESS _____

ADDRESS OF BUSINESS _____ TELEPHONE NO. _____

NAME OF CONTACT PERSON/MANAGER _____

PLEASE MAIL OR FAX TO:
 DEPARTMENT OF BUSINESS AFFAIRS AND CONSUMER PROTECTION
 PUBLIC VEHICLE OPERATIONS FACILITY
 2350 WEST OGDEN, FIRST FLOOR
 CHICAGO, ILLINOIS 60608
 FAX: 312-746-9406 E-MAIL: BACPPV@cityofchicago.org

NOTE: IF YOU ARE FAXING THIS FORM, PLEASE INCLUDE A FAX COVER PAGE



PLEASE DESCRIBE IN DETAIL EXACTLY WHAT HAPPENED:

(You may attach additional sheets)

BEFORE SUBMITTING, PLEASE ATTACH ANY SUPPORTING DOCUMENTATION

(RECEIPTS, INVOICES, LETTERS, FRONT AND BACK OF CANCELLED CHECKS, PICTURES, ADVERTISEMENTS, ETC.)



READ THE FOLLOWING BEFORE SIGNING: The Department of Business Affairs and Consumer Protection enforces laws governed by the City of Chicago Municipal Code to protect consumers and businesses from unfair and deceptive practices. I understand that if I have any questions regarding this complaint and my legal rights I should contact a private attorney. I affirm that the above stated information is true and accurate to the best of my ability.

Signature

Date Submitted