



COMPLAINT INTAKE REPORT

1. For a complete list of professions regulated by DPR, please go to <https://idfpr.illinois.gov/Forms/Brochures/DPR.pdf>.
2. If you have direct/indirect knowledge of unlicensed practice for any professions regulated by Division of Professional Regulation (DPR) and/or if you wish to report an alleged violation committed by any individual/entity regulated by DPR, you may do so by either using the Department's online complaint portal, <https://idfpr.illinois.gov/Admin/DPR/Complaint.asp>, or by completing this DPR Complaint Intake Report and mailing it to the Division's Complaint Intake Unit (CIU). Please note that all complaints must be in writing and CIU does not take any complaints over the phone. Furthermore, at this time CIU is not accepting any walk-in complaints.
3. Please complete the form in detail including specific sources and related contact information. Ensure to include the correct spelling of full name and contact information of the person(s) against whom you are complaining, as well as list the related profession, specific dates of incident, and provide a description of the complaint issues. Please complete a separate complaint form for each profession in its entirety. If more information is needed, you will be contacted by email or phone.
4. Please type or print clearly in dark ink. Use a separate sheet of paper if more space is needed.
5. Please attach copies of any supporting documents concerning your complaint. Do not send originals.
6. It is important to remember that the IDFPR cannot act on your behalf in a court of law or as a lawyer, give legal advice.

COMPLAINANT INFORMATION

| | | |
|-----------------|--------------------------|----------|
| Your Name | Daytime Telephone Number | |
| Mailing Address | Evening Telephone Number | |
| City/Town | State | ZIP Code |
| Email Address | | |

YOUR COMPLAINT IS AGAINST (RESPONDENT INFORMATION)

| | | | |
|------------------------------|------------|---------------------|----------------------|
| Name of Provider of Services | Profession | Telephone No. | |
| Street Address | | Date Event Occurred | |
| City/Town | State | ZIP Code | County of Occurrence |

Briefly describe your complaint:

IDFPR DPR Complaint Intake Form

(Continue description here if additional space is needed.)

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To mail complaints involving a **DPR profession**, please mail to:

**Illinois Department of Financial and Professional Regulation
Division of Professional Regulation
Complaint Intake Unit
555 W. Monroe St., 5th Floor Chicago, IL 60661
Phone: (312) 814-6910
Email: FPR.CIU@illinois.gov**

DEPARTMENT USE ONLY

Complaint Received By: _____ Date: _____

How Received: Email Mail Walk-in

**** You will receive an acknowledgment letter, once the complaint is received and opened. It will include a case number you must refer to in any subsequent correspondence or phone calls. ****