

STATE OF HAWAII
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
REGULATED INDUSTRIES COMPLAINTS OFFICE
CONSUMER RESOURCE CENTER
OAHU OFFICE
 235 SOUTH BERETANIA STREET, 9TH FLOOR
 HONOLULU, HI 96813
 cca.hawaii.gov/rico

_____ - _____ - _____

FOR OFFICIAL USE ONLY

COMPLAINT FORM - HEALTH CARE PROFESSIONS

Important information about filing a complaint. RICO's jurisdiction is limited to violations of Hawaii's licensing laws and rules. Violations vary depending on the license type involved. As part of the review and investigation process, the company or individual you are complaining about may be informed of this matter and provided information about your complaint. Additional information about the industries RICO regulates, applicable licensing laws and rules, and a list of Frequently Asked Questions are available on the RICO website.

If you want to report on-going unlicensed activity, please complete the Report of On-Going Unlicensed Activity form.

COMPLAINING WITNESS INFORMATION (Your information)

<input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs.	(Last Name)	(First Name)	(Middle Name)
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Your mailing address:	Telephone numbers (✓ check best number to reach you at): <input type="checkbox"/> Daytime phone: () <input type="checkbox"/> Residence phone: ()
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Your email:	<input type="checkbox"/> Cellular phone: ()
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Are you filing on behalf of a business or organization? Yes No

If yes, please provide the name of your business/organization:

If someone is representing the COMPLAINING WITNESS, please complete this section.

Representative's Name	Mailing Address	Phone No.
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Representative's relationship to the COMPLAINING WITNESS: _____
If court appointed to assist the COMPLAINING WITNESS, please provide proof of legal guardianship.

Signature of COMPLAINING WITNESS authorizing RICO to work with representative: _____

Explain here if COMPLAINING WITNESS is unable to sign: _____

ADDITIONAL QUESTIONS

Other agency referral: If upon review RICO believes a referral to another government agency is appropriate, do you consent to have your complaint sent to that agency for review? Yes No

What is your desired resolution? In answering, please be aware that RICO is a government agency that represents the State of Hawaii as a whole, and not individual persons like consumers. Consumers, therefore, should consider seeking private or civil dispute resolution procedures and remedies too.

CERTIFICATION

Complaining witnesses are required to complete, sign and certify below for RICO to process this. We can assist you if you are unable to sign or otherwise complete this form. Knowingly submitting false or untrue information may constitute a violation of Hawaii Revised Statutes §710-1063.

I certify that all statements and attachments provided to RICO as part of this complaint are true and correct to the best of my knowledge. I understand that all documents and materials that I provide to RICO will not be returned to me and are subject to the State's retention policies, including purging and destruction.

I understand that investigation and prosecution are at the discretion of the agency and that RICO does not represent me in this dispute.

Complaining Witness's/Representative's signature:

Date:

Print name here:

Check here if signing as representative

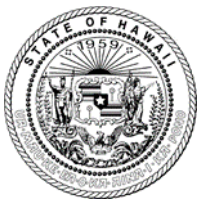
Profession or Area of Practice:

Acupuncture Practitioner
Athletic Trainer
Audiologist
Behavior Analyst
Chiropractor
Dentist/Dental Hygienist
Dispensing Optician
EMT/Paramedic

Hearing Aid Dealer/Fitter
Marriage/Family Therapist
Massage Therapist/Establishment
Mental Health Counselor
Midwives
Naturopath
Nurse (RN, LPN, APRN)
Nursing Home Administrator

Occupational Therapist
Optometrist
Pharmacy/Pharmacist
Physical Therapist
Physician or Osteopath
Physician Assistant
Podiatrist
Psychologist

Respiratory Therapist
Social Worker
Speech Pathologist
Veterinarian
Veterinary Technician



Mail completed complaint forms to:

**Regulated Industries Complaints Office
Attention: Consumer Resource Center
235 South Beretania Street, 9th Floor
Honolulu, Hawaii 96813**

Complaint forms are accepted at neighbor island RICO offices for mailing.

This material is available in alternate formats including large print. For assistance, please contact the RICO Consumer Resource Center at 1-844-808-3222.