



**GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF FOR-HIRE VEHICLES**

2235 Shannon Place SE, Suite 2001, Washington, DC 20020

PHONE: (202) 645-7300/855-484-4966, FAX: (202) 889-3604, WEBSITE: www.dfhv.dc.gov

VEHICLE INSPECTION OFFICER (VIO) COMPLAINT FORM

Please complete the below information; your identity will be kept confidential.

NAME: _____ COMPANY: _____

ADDRESS: _____

EMAIL ADDRESS: _____ TIME/DATE OF INCIDENT: _____

PRIMARY TELEPHONE: _____

FACE ID: _____ H-TAG/LICENSE PLATE: _____

OFFICER'S NAME: _____ OFFICER'S BADGE NO.: _____

DESCRIPTION OF COMPLAINT (Please include a description of your complaint, the name of the VIO, and the date(s) of the incident; along with any efforts you or the officer made to resolve the issue).

I AFFIRM THAT ALL INFORMATION PROVIDED ON THIS FORM AND IN THE SUPPORTING DOCUMENTS I HAVE SUBMITTED (IF ANY) IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

Making a false statement on this form may subject you to criminal and civil penalties, which may include a \$500 civil fine and license suspension of your DFHV license as provided in Chapter 24 of the D.C. Code and Title 31 of the D.C. Municipal Regulations.

SIGNATURE

DATE

Official Use Only:
RECEIVED BY AGENCY: _____

DATE: _____