



Fire Equipment Complaint Form

Fire Equipment Distributor and Employee Regulation Act of 2011

This form is to be used by any citizen that witnesses violation of the Fire Equipment Distributor and Employee Regulation Act (225 ILCS 217/). This form can be submitted via email to: SFM.FireEquipment@illinois.gov or printed and mailed to: **Office of the State Fire Marshal, Attn: Fire Equipment Licensing, 1035 Stevenson Drive, Springfield, IL 62703.**

Date of Incident: _____ Location: _____

Address: _____

Distributor Name: _____ Phone: _____

Address: _____

Illinois Distributor License Number: _____

Employee Name: _____

Nature of Complaint (please include reference to NFPA Standard or State Law this violation is regarding):

Submitted by: _____ Company: _____

Address: _____ Phone: _____

Complaint filed by: _____ Phone: _____