



# ANSWER FORM

For Use to Reply to Complaints Filed with the Arkansas State Board for Licensure  
For Professional Engineers and Professional Surveyors  
P.O. Box 3750, Little Rock, Arkansas 72203  
Phone (501)682-2824, Fax (501)682-2827

## INSTRUCTIONS:

1. Please type or print legibly.
2. Respond completely and directly to statements made by Complainant(s).
3. If more space is required, attach additional pages as needed.
4. Include names, phone numbers, and addresses of persons who can confirm statements made in the answer.
5. Include copies of relevant plats, plans, or other documents.
6. Please be sure to sign this Answer Form and have your signature witnessed by a Notary.
7. Return the completed Answer Form to the Board at the address above.

NOTE: If you are unable to comply with any of these instructions because of a disability, contact the Board for assistance under the provisions of the Americans with Disabilities Act.

NAME OF RESPONDENT \_\_\_\_\_

FIRM OR COMPANY NAME \_\_\_\_\_ DAYTIME TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

## ANSWER

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, being first duly sworn, state  
Name of Respondent

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\_\_\_\_\_  
Signature of Respondent

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

(SEAL)

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

List below the persons who can confirm all or part of your foregoing statements:

_____ Name	_____ Address	_____ Telephone Number
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_____ Name	_____ Address	_____ Telephone Number
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_____ Name	_____ Address	_____ Telephone Number
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