Form 4-65 (08/18)

TEXAS ALCOHOLIC BEVERAGE COMMISSION

Texans Helping Businesses & Protecting Communities

COMPLAINT FORM

(Please complete a separate form for each location.)

Instructions:

- Use this form to complain about possible violations of the law on TABC-licensed premises or to report possible alcohol-related violations taking place at any location.
- **Provide a copy of this form to your local TABC Office; or mail it to TABC Enforcement Division, PO Box 13127, Austin, TX 78711; or fax it to 512-206-3449; or email to complaints@tabc.texas.gov.**
- For more information about complaints or to locate the nearest TABC Office visit: **http://www.tabc.texas.gov**.

☐ **Please notify me of the outcome of this complaint.** If you wish to remain anonymous, we may not be able to notify you of the outcome of the complaint.

Email Address: _____

Information provided below is subject to the Public Information Act and will be disclosed to the public upon request, as required by law. Only e-mail addresses are considered confidential under law and any other identifying information could be released to the public.

Your Contact Information:

☐ **Anonymous** **If you wish to remain anonymous, you must leave this section blank.**

Your Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: Day: ( ) – Evening: ( ) - Other: ( ) -

Where did the possible violations take place?

Name of Location: _____

Address: _____

City: _____ County: _____ Zip Code: _____

Phone: ( ) - Other: ( ) -

Name of Business or Property Owner(s), if known: _____

_____

Date(s) / Time of Day:

_____

Day(s) of the week: ☐ Sunday ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday

Details of the Complaint (What violations were committed and who committed them?)

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Date Received: _____ **For Office Use Only**