# LANGUAGE ACCESS COMPLAINT FORM

The purpose of this form is to record complaints related to language access services. Please return this form and any related documentation to: Communications, Department of Building Inspection, 1660 Mission Street, San Francisco, CA 94103 or email dbicustomerservice@sfgov.org.

## Today's Date
__/__/____ (MM/DD/YYYY)

## Name

### Contact Information

Email:  
Phone:  
Mailing Address:  

## COMPLAINT DETAILS

### Date of Incident
__/__/____ (MM/DD/YYYY)  

### Department

### Address

### Language Access Issues (check all that apply)

- [ ] 1. I was not informed about my right to request language access services  
- [ ] 2. Lack of translated forms/written materials or publicly-posted documents  
- [ ] 3. Lack of bilingual employees to provide assistance in my language  
- [ ] 4. Lack of recorded telephone messages in my language  
- [ ] 5. Poor quality of interpretation services/poor quality of translated documents  
- [ ] 6. Delayed access services in my language  
- [ ] 7. Other (please specify) _____________________

### What language did you need assistance with?

- [ ] Cantonese  
- [ ] Mandarin  
- [ ] Spanish  
- [ ] Russian  
- [ ] Filipino  
- [ ] Vietnamese  
- [ ] Other (please specify) _______

### Description of the Complaint (attach additional pages if necessary)

Additional pages attached?  
[ ] Yes  
[ ] No

## FORM ASSISTANCE

Did someone assist you in completing this form?

- [ ] Yes (Input information below)  
- [ ] No (Leave Blank)  

### Assisted by

Name  
Department/Organization

### Contact Information

Email:  
Phone:  
Mailing Address:  

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Please return this form and any related documentation to the Department of Building Inspection, Communications  
Fax #: (415) 558-6225, email: dbicustomerservice@sfgov.org, or mail to: 1660 Mission Street, San Francisco, CA 94103.