

Complaint Form for NYSDOL Industry Inspection

Please complete as much information as you have available.
Name:
Would you like to remain anonymous: yes no
Contact info:
Best phone Number:
Email:
Complaint associated with which Jurisdiction:
Entity to be inspected:
Address to be inspected:
How long is entity expected to be at that address:
Complaint:

OR Submit completed document too: industry.dosh@labor.ny.gov