



City of Tukwila, Washington Complaint Form for Violation of Tukwila Municipal Code Chapter 5.63 Concerning Labor Standards for Certain Employees

SECTION 1: INSTRUCTIONS AND FAQs

What is this form for? This Complaint Form is required to present complaints to the City of Tukwila City Attorney for violations of Tukwila Municipal Code (“TMC”) Chapter 5.63 Concerning Labor Standards for Certain Employees and/or the Tukwila Labor Standards. For links to TMC Chapter 5.63 and the applicable Tukwila Labor Standards Rules, go to www.TukwilaWa.gov/MinimumWage.

Who can present a claim to the City? “An individual or entity acting on their behalf” of a person or a class of persons that suffers financial injury as a result of a violation of TMC Chapter 5.63 or is the subject of prohibited retaliation under TMC Chapter 5.63 can present a complaint to the City Attorney.

Does a complaint have to be presented to the City in order to file a lawsuit? No. Civil actions can be filed in a court of competent jurisdiction against the employer or other person violating TMC Chapter 5.63 without presenting a complaint to the City, and such civil actions have a statute of limitations of 5 years.

Is the City required to act on complaints? The City is authorized to investigate and, if the City Attorney deems appropriate, initiate legal or other action to remedy any violation of TMC Chapter 5.63, but they are not required to do so.

How do I submit this form to the City? Complaint Forms may be submitted to the City Attorney by U.S. Mail addressed to “Office of the Tukwila City Attorney,” 6200 Southcenter Blvd, Tukwila, WA 98188 or a photocopy or PDF of the signed form can be submitted by email addressed to MinimumWage@TukwilaWA.gov, with the subject line “Complaint Form.” The Complaint Form is considered to be presented to the City Attorney on the date the Complaint Form is received by the City of Tukwila through either of those two delivery methods.

Next Steps: After reading this “Section 1: Instructions and FAQs,” please fill out and sign “Section 2: Complaint Information.” If the Complainant consents to having an individual or entity acting on their behalf, then fill out and sign both “Section 2: Complaint Information” **and** “Section 3: Representative Authorization.”

SECTION 2: COMPLAINT INFORMATION

Complainant's Name: _____

Complainant's Mailing Address: _____

Complainant's Phone: _____ Complainant's Email: _____

Legal Name of Alleged Violator (if known):

Alleged Violator's DBA ("doing business as" or "also known as" an assumed name), if applicable:

Alleged Violator's primary Tukwila address (must be physical street addresses, no P.O. boxes):

Alleged Violator's mailing address):

Alleged Violator's phone _____ Email _____

Date(s) of Alleged Violation(s) _____

Location(s) where Alleged Violation(s) Occurred: _____

Description of Alleged Violation(s) (attach extra pages if needed):

Amount of Complainant's estimated damages: _____

List all persons with firsthand knowledge of the alleged violation(s), including names, addresses, phone numbers, and emails if known (attach extra pages if needed):

Attach copies of all documentation relating to the alleged violation(s) Complainant's damages. **NOTE:** This complaint and attached documentation may be required to be disclosed to the public under the Public Records Act, Chapter 42.56 RCW ("PRA"). Some documents may be exempt from disclosure such as, but not limited to, certain trade secrets as defined by the Uniform Trade Secrets Act ("UTSA") Chapter 19.108 RCW. List any documents exempt from disclosure above and provide a brief description but do not attach them. If the City Attorney wants to review copies of records that are exempt from disclosure under the PRA, the City Attorney or designee may request them from the Complainant, the Alleged Violator, or from others after reviewing the Complaint Form.

Information revealing the identity of persons who file complaints alleging violations of the City of Tukwila Labor Standards is exempt from disclosure under the PRA if at the time a complaint is filed the complainant, victim, or witness indicates a desire for disclosure or nondisclosure.

Are you requesting that the City of Tukwila not disclose information revealing your identity, to the best of its ability? YES NO

In addition to the PRA, disclosure of information regarding a complaint may be required under other laws. For more information about confidentiality, email MinimumWage@TukwilaWA.gov, with the subject line "Confidentiality question."

This Complaint Form must be signed below by the Complainant. If an individual or entity is acting on behalf of the Complainant, the Complainant and the individual or entity acting on behalf of the Complainant must also fill out and sign the "Representative Authorization" in Section 3 in addition to the Complainant signing this form below.

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signed on the _____ day of _____, 20____
(date) (month) (year)

at: _____
(city or other location, and state or country)

(printed name)

(signature)

For City Use Only	
Received By:	
Date:	

SECTION 3: REPRESENTATIVE AUTHORIZATION
(Do not fill out unless Complainant has a representative)

This section must be filled out if the Complainant has authorized an individual or entity to act on the Complainant's behalf. Complainants are not required to have a representative and should not fill out this Section 3 if they do not have one. If a Complainant later decides to have a representative after submitting a Complaint to the City Attorney, they can do so by submitting this Representative Authorization form at that time.

The Complainant named below hereby authorizes the individual or entity named below to act on the Complainant's behalf with respect to the Complaint for Violation of TMC Chapter 5.63 Concerning Labor Standards for Certain Employees that is described on the attached Complaint Form. This Representative Authorization is effective on the date that a fully signed and dated copy is received by the City Attorney.

The Complainant and the Representative understand that this Representative Authorization can be withdrawn at any time by providing a written Notice of Withdrawal to the City Attorney by U.S. Mail addressed to "Office of the Tukwila City Attorney," 6200 Southcenter Blvd, Tukwila, WA 98188 or a photocopy or PDF of the signed Notice of Withdrawal can be submitted by email addressed to MinimumWage@TukwilaWA.gov, with the subject line "Notice of Withdrawal."

Complainant's Signature: _____ Date: _____

Complainant's typed or printed name: _____

Representative's name: _____

If Representative is an entity, name of Representative's contact person(s):

Representative's phone _____ Email _____

Representative's Signature: _____ Date: _____

Representative's typed or printed name: _____