**Section 454.510 Complaints**

a) Whenever any person intends to complain to the Department about the justness or reasonableness of any rate or charge filed by any operator with the Department, that person shall make the complaint in writing and mail or submit it to: Bureau of Safety Programs, Illinois Department of Transportation, 1340 North 9th Street, P.O. Box 19212, Springfield, Illinois 62794-9212.

b) Each complaint shall include:

1) the name, address and telephone number of the person making the complaint;

2) a statement whether the complainant owns or operates an Official Testing Station, and if applicable, the name, business address and telephone number of that Official Testing Station;

3) the name and if known the business address, of the operator against whom the person complains;

4) A description or statement of the rates about which the person complains;

5) a statement setting forth in detail the specific facts and reasons why the person believes the rates about which that person complains is unjust or unreasonable; and

6) any information, document or other matters upon which the person relies.

c) The facts asserted in any complaint must be sworn to by persons having knowledge thereof. Except under unusual circumstances, those persons should be available to appear as witnesses at a hearing convened by the Department to substantiate the facts asserted should a hearing become necessary.

d) An original copy of the complaint shall be filed with the Department. The original must show the signature, capacity and impression seal, if any, of the person administering the oath, and the date of the oath.

(Source: Amended at 35 Ill. Reg. 3564, effective February 10, 2011)