

# Action Form

**Submission Instructions** - This is an Adobe fill-in and print form, please fill in the fields and use your browser's print option to print the form. Mail the form to the address provided at the bottom of this form.

**Company Name** \_\_\_\_\_

**Type of Business** \_\_\_\_\_

**# of Employees** \_\_\_\_\_

**Address Line 1** \_\_\_\_\_

**Address Line 2** \_\_\_\_\_

**City** \_\_\_\_\_

**State** \_\_\_\_\_

**Zip** \_\_\_\_\_

**Contact Name** \_\_\_\_\_

**Daytime Phone #** \_\_\_\_\_

**Contact eMail** \_\_\_\_\_

**How Did You Hear About Us?** \_\_\_\_\_

Describe Your Question Or Problem? \_\_\_\_\_

Name of DEP Official You Are Dealing With, If Any. \_\_\_\_\_

Has the Issue Ever Been in a Hearing or Other Formal Legal Action?

Yes

No

Describe Formal Legal, If Any. \_\_\_\_\_

Have You Requested Assistance From Any Other PA State Agencies or Assistance Providers?  Yes  No

If Yes, Please Provide the Names And Telephone Numbers Of Any State Agency or Provider Representative You Have Contacted. \_\_\_\_\_

May We Contact These Agencies Or Providers About Your Matter?  Yes  No

Please Provide Any Additional Comments Here. \_\_\_\_\_

Mail This Information to the SBO

Jeanne J. Dworetzky  
DEP Small Business Ombudsman  
DEP-OETD  
P.O. Box 8772  
Harrisburg, PA 17105-8772  
Telephone: 717-783-8411

Gene Delvecchio  
Program Analyst  
DEP-OETD  
P.O. Box 8772  
Harrisburg, PA 17105-8772  
Telephone: 717-772-8951