



Transportation Network Company (TNC) Complaint Form

Instructions

What is this form?

This is a form to file a complaint against a Transportation Network Company (TNC) with Colorado's Division of Labor Standards and Statistics. This form can only be used to file complaints for violations of the TNC Act (Colorado Revised Statute § 8-4-127). To learn more about the TNC Act, visit the Division's [INFOs webpage](#) and refer to INFO 23B, or visit the Division's [TNC webpage](#).

What is a Transportation Network Company?

A Transportation Network Company is a company with a digital platform connecting drivers with consumers seeking rides.

NOTE: This form cannot be used to file complaints because you did not receive a ride that you ordered or you were not satisfied with the service from a ride you ordered through a TNC.

This form is only for filing complaints about violations of the TNC Act. If your complaint is about something else, please visit the Division's [Complaints webpage](#) to determine if there is a different complaint you may file.

Please note that the Division reviews all complaints to determine which it will investigate. It is **not** required by law to investigate all TNC Complaints.



What if I have a different type of complaint or want to learn more about labor laws?

To locate forms related to wage complaints or to file a wage complaint, visit the Division's [Demands, Complaints, Responses, and Settlements page](#). To learn more about Colorado labor law, visit the Division's [Interpretive Notice and Formal Opinions \(INFOs\) and Other Published Guidance webpage](#), or [Labor Statutes webpage](#). For questions about this form, the complaint process, or the TNC Act, visit the Division website, call 303-318-8441, or email cdle_accountability_programs@state.co.us.

What if I'm unsure if my complaint is related to a Transportation Network Company?

If you're unsure whether your complaint is related to a Transportation Network Company but believe you may have experienced a violation of Colorado labor and employment laws, you can contact the Division by emailing cdle_labor_standards@state.co.us or calling our call center at 303-318-8441. For more information about Colorado labor and employment laws, including call center hours and frequently asked questions, please visit the [Division's website](#).

Complaint Form

*Indicates a required question.

Is this complaint related to a Transportation Network Company?*

Yes

No

Unsure

Have you filed a complaint in court or with another agency regarding the same issues in this complaint?*

Yes

No

Which court or agency did you file the complaint with?*

Date you filed the complaint (MM/DD/YYYY).*



Please describe the outcome of this complaint.*

Are you filing a complaint as a transportation driver or consumer?*

Transportation Driver

Consumer

You may submit a complaint anonymously. However, providing your name and contact information may help the Division investigate your complaint. The Division may contact you for more information before deciding whether to investigate this complaint. **Please note** that the Division cannot award penalties to drivers who file their complaint anonymously.

When deciding whether to investigate a TNC complaint, the Division will prioritize investigating complaints with complete, accurate, and relevant information. If we cannot reach you or you do not provide the information, your complaint may not be investigated.

Do you wish to provide your contact information?*

Yes

No

If no, you have chosen to submit an anonymous complaint. Please be aware that the Division may need additional information during our review of your complaint, and if we do not have a person to contact, we may not be able to investigate your complaint. **Please note** that the Division cannot award penalties to drivers who file their complaint anonymously.



Driver or Consumer Information (*Your information.*)

Title First Name*

Ind.

Mr. Last Name*

Ms.

Mx.

Email Address*

Phone Number

Alternate Phone Number

Mailing Address (Street/PO Box)

Mailing City

Mailing State

Mailing Zip

Is it okay for the Division to send text messages?*

Yes

No

If yes, to what cell phone number?*

Preferred Language* (Please select)

English

Other

Spanish

If you selected "Other", what language do you prefer to use?*



Do you need an interpreter?*

Yes

No

I will decide later

Authorized Representative

You can choose to have someone called an "Authorized Representative" help you with your complaint. This could be an attorney, a relative or friend, an organization, or anyone else who you want to help you file the complaint, answer questions from the Division during an investigation, or make decisions about the complaint.

By having and authorizing a representative, you are allowing 1) the Division to request or share information and documents about this claim with the representative; 2) the representative to share information and documents with the Division; and 3) the representative to make decisions for you about this claim.

You are not required to have an authorized representative. If you would like to add an authorized representative, check the box below. You can add or remove an authorized representative after filing this complaint.

I would like to add an authorized representative. By doing so, I agree to allow the individual or entity named below to represent me in the complaint process. I also authorize the Division to interact with the individual or entity listed regarding my complaint.

Authorized Representative:

Relationship to Driver or Consumer

Company/Business Name

Title

First Name*

Ind.

Mr.

Last Name*

Ms.

Mx.



Phone Number

Alternate Phone Number

Email Address*

Mailing Address (Street/PO Box)

Mailing City

Mailing State

Mailing Zip

To add another Authorized Representative, complete the section below.

Second Authorized Representative:

Relationship to Driver or Consumer

Company/Business Name

Title

First Name*

Ind.

Mr.

Last Name*

Ms.

Mx.

Phone Number

Alternate Phone Number

Email Address*

Mailing Address (Street/PO Box)

Mailing City

Mailing State

Mailing Zip



Transportation Network Company Information

Select the TNC from the list below. If the TNC that you want to file your claim against isn't listed, select, "The TNC is not listed." and provide the TNC's information below.

Select the TNC Name From the List.*

Drivers Cooperative - Colorado, LCA

Lyft, Inc

Rasier, LLC (Uber)

The TNC is not listed.

If the TNC is not listed above, complete the section below.

Name of the TNC*

TNC Mailing Address

TNC Mailing City

TNC Mailing State

TNC Mailing Zip

TNC Phone Number

TNC Email Address

Allegations:

Please select all violations that you wish to file a complaint about. Please review [Colorado Revised Statute § 8-4-127](#) or see INFO #23B on our [Guidance page](#) for additional information about each alleged violation. The descriptions provided below are brief, high-level summaries; they are not meant to provide interpretations or encompass the entirety of violations that may occur. Please review the actual statute and guidance for complete information.

Transparency for Drivers (C.R.S. § 8-4-127 (11)): Examples of violations:



- C.R.S. § 8-4-127 (11)(a) The TNC did not provide you with one or more of the required electronic disclosures when the task was offered.
- C.R.S. § 8-4-127 (11)(b) The TNC did not provide you with the required task completion disclosures via email or the online platform when you resumed available platform time after completing a task.
- C.R.S. § 8-4-127 (11)(c) The TNC did not provide you with a copy of the required disclosures within 24 hours of completing a task in a format accessible to you for at least one year.
- C.R.S. § 8-4-127 (11)(e) The TNC did not display the information on the digital platform as required in the TNC Act.
- C.R.S. § 8-4-127 (11)(f) The TNC did not provide you with the required activity report monthly or more frequently, or did not provide all of the required information on the report.

Consequences for a Driver for Accepting or Rejecting a Task (C.R.S. § 8-4-127(12)):

Examples of violations:

- (C.R.S. § 8-4-127(12) The TNC suspended, deactivated, or retaliated against you based on your lawful acceptance or rejection of a task.

If you are a driver, select the alleged violations below.

Transparency for Drivers

Consequences for Accepting or Rejecting a Task

Other violation affecting Drivers

Transparency for Consumers (C.R.S. § 8-4-127 (11)): Examples of violations:

- C.R.S. § 8-4-127 (11)(d) The TNC did not provide the required payment disclosures *before you were given the option to tip* the driver, or did not display the information as required in the TNC Act.
- C.R.S. § 8-4-127 (11)(e) The TNC did not display the information on the digital platform as required in the TNC Act.



If you are a consumer, select the alleged violations below.

Transparency for Consumers

Other violation affecting Consumers

Please Provide an Explanation of the Alleged Violation(s) Below.*

If you selected "Other" to the previous question, please provide details here.

Attachments

To provide additional information to support your TNC Complaint, please attach it to this form.

Relevant information may include a copy of an email, a screenshot of any online content, or any other documentation you believe may support your complaint.

Relevant Website Addresses

If you would like to provide a web address where relevant online content can be found, please enter it below.



Agreement and Signature

Please note the Claimant, or the Claimant's authorized representative, must sign this page.

- I declare under penalty of perjury § 18-8-501, et seq., C.R.S. that the information provided is true and correct
- I have been notified and understand that any person providing false information to the Division in order to obtain and/or retain anything of value may be subject to criminal prosecution under the laws of the State of Colorado with possible penalties of imprisonment, fines, or both.
- I authorize the Division to investigate and assist in this matter.
- I understand that any information supplied to the Division – including this form and attached documents – may be provided to the TNC/principal, the agents of the TNC/principal involved in the dispute, and other agencies or individuals as the Division deems appropriate.
- I understand that the Division does not guarantee a resolution to this dispute, and that it may be necessary to pursue the matter further through other methods.
- I understand that if I move, get a new phone number, or have other changes to my contact information, I must let the Division know right away. If I do not update my information, and the Division cannot contact me, my complaint may be dismissed.

By typing my name below I am entering it as my electronic signature and agreeing to the statements above.

Claimant or Authorized Representative's
Typed electronic signature (if **anonymous**,
leave blank)

Date (MM/DD/YYYY)