



State of California—Health and Human Services Agency  
**California Department of Public Health**



**GAVIN NEWSOM**  
Governor

**TOMÁS J. ARAGÓN, MD, DrPH**  
Director and State Public Health Officer

**TO:** Interested Parties

**FROM:** Betty Ho, R.E.H.S.  
Registered Environmental Health Specialist Program

**SUBJECT: Filing a Complaint Against a Registered Environmental Health Specialist**

Please complete the attached form to file a complaint with the California Department of Public Health, Registered Environmental Health Specialist Program.

The purpose of the Registered Environmental Health Specialist Program is: “to safeguard the health, safety, and general welfare of the public by the registration of those environmental health professionals practicing as environmental health specialists who have completed an approved environmental health or science curriculum and who are qualified to work within the scope of the field of environmental health as defined by this article.” (Health & Safety Code, §106600).

The Department’s exclusive task in considering your complaint is to determine, upon the recommendation of the Environmental Health Specialist Registration Committee, whether specified grounds exist to suspend or revoke the respondent’s registration. In filing the complaint be as specific as possible about who, what, when, where, why, and how of your concern. Provide as much information as possible including names, addresses, and phone numbers of people who have knowledge of the events surrounding your allegation. Include any pertinent support documentation such as copies of contracts, plans, and maps. The Department needs all of the facts you can provide in order to process your complaint. It does not have the staff to investigate inquiries or complaints based only on suspicion or speculation.

**Mail the form and any additional information to:**

California Department of Public Health  
Environmental Health Specialist Registration Program  
MS 7404, IMS K-2  
PO Box 997377  
Sacramento, California 95899-7377

If you have any questions, please call Betty Ho at (916) 210-8541 or email at [Betty.Ho@cdph.ca.gov](mailto:Betty.Ho@cdph.ca.gov).

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**CDPH EHS Registration Program**  
MS 7404 IMS K-2 ▪ P.O. Box 997377 ▪ Sacramento, CA 95899-7377  
(916) 449-5662 • (916) 449-5665 FAX  
Department Webpage: [www.cdph.ca.gov/REHS](http://www.cdph.ca.gov/REHS)

