

MARTIN J. WALSH

MAYOR'S OFFICE OF CONSUMER AFFAIRS AND LICENSING

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CONSUMER COMPLAINT FORM

Mayor	Please Print Staff/LC	P/ Referral				
CONSUMER	Name:					
(must be a Boston resident)	Address:					
	City/State/Zip:					
	Daytime Phone: () - Optional: Are you 65 years or older?	JΥ□Ν				
	Email:					
COMPLAINT AGAINST	Business Name:					
(address must be provided)	Address:					
	City/State/Zip:					
	Daytime Phone: () -					
	Email:					
NATURE OF COMPLAINT	Reason for your complaint:					
	Product / service involved:					
	Cost of product/service: \$					
	Amount paid to date: \$ Date of transaction: /	1				
	Was a contract signed? ☐ Yes ☐ No					
	How did you pay for the product / service?					
	□ Cash □ Check □ Credit Card □ Installment plan / loan					
	Was the product / service advertised?					
	☐ Mail ☐ Radio / TV ☐ Newspaper ☐ Telephone ☐ Internet					
	Have you complained directly to the company?					
	☐ In person ☐ By phone ☐ By letter					
	To whom:Date:/	/				
	What outcome did you seek?					
	Have you contacted another agency?					
	If yes, please give the name of the agency:					
	Have you hired an attorney? ☐ Yes ☐ No					
	If yes, please give the name of the attorney:					
	May we send a copy of the complaint to the company? $\ \square$ Yes $\ \square$ No					

NATURE OF COMPLAINT	Please describe your complaint in detail. Include all relevant names and other information and describe any action you have taken to dispute and how the business has responded to you. (If necessary, attach additional pages.) Be sure to include clear copies of receipts, sales contracts, warranties, claim checks and other relevant documentation supporting the facts set forth in this complaint. PLEASE KEEP YOUR ORIGINALS; SEND COPIES ONLY.							
	-							
FOR MOTOR VEHICLE								
COMPLAINTS ONLY	Make/Model:			Year:				
	Purchased:	□ New	□ Used	Date of Purchase:	/	/		
	Vehicle Identification Number (VIN):							
	Mileage at pur	chase:		Current mileage:				
	Purchase price: \$							
	Total number of business days vehicle has been in repair shop for the same problem or defect:							
CONFIDENTIALITY	Under most circumstances, the text of your complaint will be considered a public record, a copy of which is available to any member of the public upon request. However, you name, address, phone number, and any other information that identifies you will not be disclosed in response to a request that asks for a complaint submitted by you.							
	Signature:			Date	e: /	<u>/</u>		