AUCTIONEER COMPLAINT FORM

INSTRUCTIONS: Please complete this form and return to the above address if you have reason to believe that an Auctioneer licensee regulated by the Department of Business Regulation has violated the law or failed to meet his/her responsibilities and obligation to the public. Please print or type. This form will NOT be accepted unless signed by complainant.

COMPLAINANT’S Name:

Residence:

Mailing Address (If different from Residence):

Daytime Telephone number: Nighttime Telephone Number:

Name and address of AUCTIONEER COMPANY/FIRM the complaint is being made:

Name of AUCTIONEER the complaint is being made:

Date and Time and Place of alleged Violation:

Other Federal, State Municipal, Local Agencies, or Legal Counsel you have contacted, including results of contacts:

On the reverse side of this form, or on an attached piece of paper, explain as fully as possible the exact nature of your complaint against the licensee or regulated activity. Be sure to include specific information such as dates and purchase services, name, address, telephone of offending licensee, account numbers, etc. Also, attach any documentation which you feel will help support your allegations including sales slips, warranty contracts, purchase and sales agreement, canceled checks, travel vouchers, insurance policies, etc.

The undersigned swears to or affirms the truth and accuracy of all statements, answers, representations and allegations contained herein, including all statements hereto attached.

X___________________________________________  Date:  _______

Signed