



DIVISION OF MOTORIST SERVICES COMPLAINT AFFIDAVIT

FOR OFFICIAL USE ONLY

<p style="text-align: center;">TYPE OF COMPLAINT</p> <p><input type="checkbox"/> Motor Vehicle Dealer</p> <p><input type="checkbox"/> Mobile Home Dealer</p> <p><input type="checkbox"/> Mobile Home Manufacturer</p> <p><input type="checkbox"/> RV Dealer/Manufacturer</p> <p><input type="checkbox"/> Odometer Fraud</p> <p><input type="checkbox"/> Other</p>	<p>Date Opened: _____ Date Closed: _____</p> <p>Closing Code: _____</p> <p>Complaint #: _____</p> <p>Investigator: _____</p>
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COMPLAINANT INFORMATION
<p>Name: _____ Date of Birth: _____ E-mail Address: _____</p> <p>Address: _____</p> <p>City/County/State/Zip Code: _____</p> <p>Home Telephone Number: _____ Work Telephone Number: _____ FAX Number: _____</p> <p>Driver License/ID Number (In lieu of FL DL/ID, an Out of State/U.S. Territory DL can be used): _____</p> <p>In lieu of DL or ID, a U.S. or Out of Country Passport can be used : _____</p>

DEALERSHIP INFORMATION
<p>Dealership Name: _____</p> <p>Address: _____</p> <p>City/County/State/Zip Code: _____</p> <p>E-mail Address: _____ FAX Number: _____</p> <p>Dealer License Number (if known): _____</p>

<p>Salesperson's Name (if known): _____</p>

VEHICLE/MOBILE HOME/INSPECTION INFORMATION
<p>Make/Model/Year: _____ Date Purchased: _____ Date Delivered: _____</p> <p>Vehicle Identification Number: _____ Tag Number: _____</p>

MOBILE HOME, RECREATIONAL VEHICLE, OR PARK TRAILER INFORMATION
<small>(Complete this section only if a mobile home, recreational vehicle or park trailer is involved in your complaint.)</small>
<p>Name of Manufacturer: _____</p> <p>Manufacturer's Address: _____</p> <p>City/County/State/Zip Code: _____</p> <p>HUD Label (red/silver metal tag on rear of unit): _____</p> <p>Florida Seal Number if unit is a recreational vehicle or park trailer (by HUD Label or front): _____</p>

