

**RECORD OF COMPLAINT FORM**



**READ THE ATTACHED BROCHURE *BEFORE* COMPLETING YOUR COMPLAINT. NOT ALL COMPLAINTS ARE INVESTIGATED**

**Instructions:** Type or print the following information for the person filing the complaint and the Business/Seller the complaint is against.

- Name — First name, middle initial(s) and last name
- Address — Street, town/city and zip code
- Telephone numbers — Area code and number(s) where you can be called during the day and evening

**I. COMPLAINANT (Person Filing Complaint)**

NAME (FIRST, MIDDLE INITIAL(S), LAST)		
STREET OR P. O. BOX	APT. NUMBER	DRIVER LICENSE OR IDENTIFICATION NUMBER
CITY	STATE	ZIP CODE
DAY TELEPHONE NUMBER	EVENING TELEPHONE NUMBER	
SIGNATURE	DATE	

**II. BUSINESS/SELLER COMPLAINT IS AGAINST**

NAME (FIRST, MIDDLE INITIAL(S), LAST)		
STREET OR P. O. BOX	TELEPHONE NUMBER	
CITY	STATE	ZIP CODE
DID YOU SEND A PREVIOUS COMPLAINT TO DMV AGAINST THIS BUSINESS/SELLER?	IF YES, WHEN?	

May we show a copy of your complaint to the business/seller? .....  Yes  No

If the transaction occurred at a location different than the business address above, please list it here.

Address:

**III. VEHICLE INFORMATION** Write the license plate number and vehicle identification number as they are shown on the contract between the buyer and seller.  
 Enter the purchase date (same as when the contract was signed).

YEAR	MAKE	MODEL	LICENSE PLATE NUMBER	STATE
VEHICLE IDENTIFICATION NUMBER (VIN)			PURCHASE DATE	

**IV. COMPLAINT** Explain the details of this complaint.

**IV. COMPLAINT (continued)**

**IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS OF PAPER**

**V. MAILING DIRECTIONS**

To help explain the details of your complaint, **YOU MUST SUPPLY PHOTOCOPIES OF THOSE DOCUMENTS RELATED TO YOUR COMPLAINT.** (Include: contracts, warranties, receipts, cancelled checks, repair orders, photographs, letters)

**—DO NOT SEND ORIGINAL DOCUMENTS—**

**PHOTOCOPY THE COMPLETED COMPLAINT. KEEP A COPY FOR YOUR RECORDS.**

- **Mail the complaint and copies of supporting documents to the Investigations Office closest to where the incident took place (see list below).**

**FAILURE TO SEND SUPPORTING DOCUMENTS  
MAY DELAY RESPONSE TO YOUR COMPLAINT**

**VI. DEPARTMENT OF MOTOR VEHICLES INVESTIGATIONS DISTRICT OFFICES**

<b>CITY</b>	<b>STREET ADDRESS</b>	<b>ZIP CODE</b>
Anaheim	2450 East Lincoln Avenue, #120	92806-4990
Artesia	17100 South Pioneer Boulevard, #320	90701-2700
Bakersfield	7000 Schirra Court	93313-2117
Campbell	440 Darryl Drive	95008-0939
Chula Vista	30 North Glover Avenue	91910-1040
El Monte	3204 Rosemead Boulevard, #202	91731-2912
Fresno	2510 S. East Avenue, #100B	93706-8007
Hayward	1314 West Winton Avenue	94545-1408
Irvine	18231 McDermott West, #100	92614-6720
Mission Hills	15455 San Fernando Mission Blvd., Ste. 305	91345
Los Angeles (Culver City)	11400 West Washington	90066-6089
Los Angeles (Lincoln Park)	3529 North Mission Road	90031-3120
Los Angeles (Metro)	3615 South Hope Street	90007-4370
Riverside	6296 Rivercrest Drive, #A	92507-0738
Roseville	151 North Sunrise Avenue, #1006	95661-2930
Sacramento	8259 Demetre Avenue, MS/L219	95828-0932
San Diego (Mission Valley)	2878 Camino Del Rio South, #310	92108
San Diego	4375 Derrick Drive	92117-4990
San Francisco	5 Thomas Mellon Circle, #168	94134-2594
San Bernardino	1845 Business Center Drive, #210	92408-3447
Santa Rosa	2570 Corby Avenue	95407-6005
South Bay	17100 S. Pioneer Boulevard, #320	90302-3099
Stockton	1507 E. March Lane, Ste. B	95210
Vallejo	200 Couch Street	94590-2904
Ventura	1732 Palma Drive, #202	93003-5717
West Covina	800 South Glendora Avenue, Rm-100	91790-4201