

**OFFICE OF THE ATTORNEY GENERAL OF VIRGINIA
CONSUMER PROTECTION SECTION**

CONSUMER COMPLAINT FORM

Important information – Please read first

- The Consumer Protection Section of the Office of the Attorney General of Virginia provides protection to consumers from fraud, deception, and illegal practices in the marketplace.
- Our telephone counselors are available to assist you with consumer questions. Please call the Consumer Protection Hotline at (800) 552-9963 if calling from Virginia, or (804) 786-2042 if calling from the Richmond area or from outside Virginia. Our business hours are 8:30 a.m. to 5:00 p.m., Monday through Friday.
- We are authorized to handle complaints related to the advertisement, sale, or lease of goods and services that are intended for personal, family or home use.
- We do not have jurisdiction over complaints related to transactions between private individuals where no business or merchant is involved, or transactions involving products or services that are intended for business or commercial use.
- We are not authorized to offer legal advice, provide legal representation, or pursue matters in court on behalf of individual complainants.
- We will not handle complaints that are scheduled to be heard or have already been heard in a court of law. Likewise, we will not handle complaints that are under investigation or have already been handled by the agency or entity with proper jurisdiction.
- Before you fill out our complaint form, please ensure that we are the proper office to assist you. Certain complaints might be within the jurisdiction of other local, state, or federal offices. Our telephone counselors can help you make this determination, or you can check by yourself by reviewing the “Where to File A Complaint” portion of our website at www.ag.virginia.gov/consumer%20protection.
- If you are going to submit a complaint form to us, please make sure to include **COPIES** of any supporting documents such as contracts, invoices, receipts, etc. Do **NOT** send originals. Also, we do **NOT** need your Social Security Number or any other personal financial information not related to your complaint. Please mark out such information from any documents that you wish to send us.
- Our contact information is as follows:

Office of the Attorney General of Virginia
Consumer Protection Section
900 East Main Street
Richmond, VA 23219
Consumer Protection Hotline: (800) 552-9963 or (804) 786-2042
Fax: (804) 225-4378
Website: www.ag.virginia.gov

Local office of consumer affairs

- **Fairfax County** has its own locally operated office of consumer affairs. If your complaint resulted from a transaction in that locality, please contact the office directly:

Fairfax County Department of Cable and Consumer Services
Consumer Affairs Branch
12000 Government Center Parkway, Suite 433, Fairfax, VA 22035
Phone: (703) 222-8435 Website: www.fairfaxcounty.gov/consumer

What happens to your complaint once we receive it?

- We will review your complaint and assign a number to it. We will notify you of our initial course of action or recommendation. Your complaint may be assigned to one of our staff members or it may be referred to the local, state, or federal office that has proper jurisdiction. In some instances, if a negotiated settlement cannot be achieved, we may advise you to consider pursuing your complaint through the courts.
- If you need to contact us about a complaint that you filed with our office, please have available your complaint number, the name of the staff member handling your complaint, and any new relevant information you may have.

The courts system

- The resolution of certain complaints may only be pursued through the courts. You should consider seeking legal advice before you pursue matters through the courts. If you do not have an attorney, you may contact one through the Virginia Lawyer Referral Service at (800) 552-7977 or (804) 775-0808. You may also wish to contact your local legal aid society.

Disclaimers

- By signing the Consumer Complaint Form, you authorize those agencies to which we may refer your complaint to evaluate your complaint on the basis of the information provided in the form, to contact you, and to take whatever lawful actions those agencies deem appropriate to attempt to resolve your complaint.
- Closed complaints will stay in our files until destroyed in accordance with established procedures for destroying public records.
- Closed complaints are subject to public disclosure under the provisions of the Virginia Freedom of Information Act, Virginia Code Section 2.2-3700 et seq. For this reason, we ask that you do not provide us with your Social Security Number or with any other personal financial information not related to this complaint.
- The information requested on the official Consumer Complaint Form, and all subsequent requests by this Office for additional information, are subject to the Government Data Collection and Dissemination Practices Act, Virginia Code Section 2.2-3800 et seq.

**OFFICE OF THE ATTORNEY GENERAL OF VIRGINIA - CONSUMER PROTECTION SECTION
OFFICIAL CONSUMER COMPLAINT FORM**

➤ **SECTION 1 – Your Information**

Mr. Mrs. Ms.	Last name	First name	Mid. Initial
Mailing address			Apt. or suite number
City	State	Zip code	Country, if not U.S.
Home number, including area code ()	Work number, including area code ()	Fax number, including area code ()	
City or county of residence	Your e-mail address		
Do you prefer to be contacted at home, work or by e-mail?		Best time to reach you between 8AM and 5PM?	

➤ **SECTION 2 – Name of Company Against Which You Are Complaining**

Full name of company			
Mailing address			Office or suite number
City	State	Zip code	Country, if not U.S.
Company's Internet address (URL)			
Telephone number, incl. area code ()	Fax number, including area code ()	Other contact number, including area code ()	

➤ **SECTION 3 – Complaint Information**

Type of product, item, or service involved (For motor vehicles, please specify if automobile, boat, motorcycle, etc.)		
Manufacturer, make or brand	Model	Year
Serial number, Vehicle Identification Number (VIN)		
Date of purchase or lease	Was this a new or used item?	
Did you sign a contract or a lease? Yes [] or No []	If yes, please indicate the following	Starting date: Expiration date:
Total amount paid	Total amount in dispute	How was payment made? (cash, credit card, check)
Did you buy an extended service contract? Yes [] or No []	If yes, name of company responsible for extended service contract or extended warranty	
For automobile complaints, indicate type of repairs or services performed (Air conditioner, brakes, oil change, transmission, etc.)		
Before any work was performed, did you ask for and receive a written copy of the cost estimate?		Yes [] or No []
Did you authorize any changes to the original estimate?		Yes [] or No [] If yes, provide details on the next page
Were the completed repairs different from what you had authorized? Yes [] or No [] If yes, provide details on the next page		

➤ **SECTION 4 – Resolution Attempts You Have Made**

Have you contacted the company? Yes [] or No []	If yes, name of person most recently contacted	Their phone number, incl. area code ()
What resolution are you seeking?		
List any other organizations you have contacted (i.e., other consumer protection offices, Better Business Bureau, etc.)		
Do you have an attorney in this case? Yes [] or No []	If yes, name of your attorney	Attorney's number, incl. area code ()
Has your complaint been heard or is it scheduled to be heard in court? Yes [] or No [] If yes, where and when?		

