



## ***New Jersey Office of the Attorney General***

Division of Consumer Affairs

P.O. Box 45025

Newark, New Jersey 07101

(973) 504-6200

(800)-242-5846

E-Mail: AskConsumerAffairs@dca.lps.state.nj.us

## **File a Consumer Complaint Against a Business**

Few things are more frustrating than paying hard-earned money for a product or service only to discover it doesn't measure up to promises or expectations, or that it is just a plain rip-off. When that happens, consumers rightfully expect to have the problem resolved or their money returned.

Even careful buyers get stuck now and then. If it happens to you, you will want to know how to proceed to get the best results.

### **First Contact the Business**

Take your problem to the salesperson, manager or the company's customer service representative. Most problems are resolved at this level. If you are still not satisfied, contact the owner or the company's headquarters.

If the business will not resolve a problem directly, consumers can file a Consumer Complaint with the Division of Consumer Affairs, the Better Business Bureau, or a small claims court. The complaint should explain in detail, with documentation (photocopies), what the problem is, who it is with, what you have done and what you want. In particular it should:

- **Identify the Business**  
Include the name and current address of the business.
- **Describe the Problem**  
Describe as completely as you can the problem with the product or service you have purchased. Were you told something that was untrue? Describe what you were told and how it was untrue. Is it defective? Explain what is wrong. Did the business refuse to honor a warranty? Explain what needs repair and include a photocopy of the warranty.
- **Explain What You Want**  
Explain what you want the business to do: how much money should be refunded or exactly how you want a product fixed or a service performed.
- **Include Photocopies**  
Always **include photocopies** of documents relevant to your complaint receipts, warranties, both sides of cancelled checks, contracts, etc. Do not send originals. Only send copies, except upon request of the agency to which you are making your complaint.

Please be advised that any information you supply may be subject to **public disclosure** pursuant to New Jersey's Open Public Records Act. If an investigation into the matter is conducted, the information is subject to public disclosure only after the completion of the investigation. **We strongly urge you to not submit sensitive personal information on these forms.**



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Please be advised that any information you supply on this complaint form may be subject to public disclosure. If an investigation into the matter is conducted, the information is subject to public disclosure only after the investigation is closed. You are also advised that the completed complaint form is a "government record," subject to disclosure under the Open Public Records Act (OPRA).

**COMPLAINT REPORTED BY:**

**COMPLAINT REPORTED AGAINST:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME TELEPHONE NUMBER: \_\_\_\_\_  
(include area code)

WORK TELEPHONE NUMBER: \_\_\_\_\_  
(include area code)

\* E-MAIL ADDRESS: \_\_\_\_\_

\* **NOTE: BY PROVIDING YOUR E-MAIL ADDRESS, YOU AGREE TO RECEIVE COMMUNICATIONS FROM THIS OFFICE BY E-MAIL.**

BUSINESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TELEPHONE NUMBER (1): \_\_\_\_\_  
(include area code)

TELEPHONE NUMBER (2): \_\_\_\_\_  
(include area code)

**For statistical and informational purposes only.** Your age:  18-29  30-44  45-59  60 or older

1. Nature of complaint (please check the appropriate box(es)):

- Automotive  Automotive Repairs  Banking  Credit Card
- Charity  Direct Mail/Sweepstakes  Home Repair  Internet/Cyberspace
- Professional Service  Stocks/Securities  Telemarketing  Telecommunications
- Bingo/Raffle  Health Club  Warranty  Advertising
- Wheelchair Lemon Law  Weighing/Measuring Devices  Used Car Lemon Law  New Car Lemon Law
- Furniture  Other (specify) \_\_\_\_\_

2. If your complaint involves a motor vehicle, please provide the following information:

- a.  New  Used
- b.  Purchased  Leased
- c. Purchase Price \_\_\_\_\_ Current Mileage \_\_\_\_\_
- d. Date of Purchase \_\_\_\_\_  With Warranty  With Service Contract  As Is
- e. Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_

3. Name of company you dealt with: \_\_\_\_\_

4. Name and title of company agents or employees you dealt with: \_\_\_\_\_

