

**VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES  
OFFICE OF CONSUMER AFFAIRS**

PO Box 1163 • Richmond, VA 23218  
Consumer Protection Hotline (800) 552-9963 or (804) 786-2042 • Fax: (804) 225-2666 • [www.vdacs.virginia.gov](http://www.vdacs.virginia.gov)

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Revised 07/06

**CONSUMER COMPLAINT FORM**

**Important information – Please read first**

The Office of Consumer Affairs provides protection to consumers from fraud, deception, and illegal practices in the marketplace.

- Our telephone counselors are available to assist you with any consumer questions you may have. The numbers to the Consumer Protection Hotline are (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 8:15 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 using the feature labeled "What is the topic of your complaint?" in our Consumer Portal at [www.vdacs.virginia.gov/consumers](http://www.vdacs.virginia.gov/consumers).
- 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 said information from any documents that you wish to send us.

**Local offices of consumer affairs**

The **City of Alexandria, Fairfax County** and the **City of Virginia Beach** all have their own locally operated offices of consumer affairs. If your complaint resulted from a transaction in any of these localities, please contact the appropriate office directly.

***Alexandria Office of Consumer Affairs***

City Hall, P.O. Box 178, Alexandria, VA 22313. (703) 838-4350

***Fairfax County Department of Telecommunications and Consumer Services***

12000 Government Center Parkway, Suite 433, Fairfax, VA 22035. (703) 222-8435

***Virginia Beach Consumer Affairs Division***

Judicial Center, Building 10B, 2425 Nimmo Parkway, Virginia Beach, VA 23456. (757) 385-5836

**What happens to your complaint once we receive it?**

- We will review your complaint, log it, and assign a case number to it. We will notify you by mail of our initial course of action or recommendation. Your complaint may be assigned to a staff member within this Office, 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 case through the courts.
- If you need to contact us about a complaint that you filed with our office, please have available your case number, the name of the staff member handling your case, as well as 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 case on the basis of the information provided in said 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 for three years from the date of closure and will then be 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.

**VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES  
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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		
If necessary, should we contact you at home, work or by e-mail?			If necessary, 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 ( )		

**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?				

