



Arizona Independent Automobile Dealers Association

5517 North Black Canyon Highway Phoenix, AZ 85015

1-800-352-4232

Tel: 602-246-1498 Fax: 602-246-1573

Web: www.aiada.net Email: aiada@aiada.net

Dealer Written Complaint Form

****IMPORTANT: Please Attach all related documentation i.e Contract, repair bills, correspondence etc.****

Note: Please note that the information given below must be notarized, under penalty of perjury.

Consumer Information:

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax Number _____

Email (opt.) _____

Vehicle Information

Vehicle	Year	_____	Color	_____
	Make	_____	Vin#	_____
	Model	_____		

Dealer Information:

Dealership _____ Owner _____

Telephone _____ Mileage NOW _____

Date of Purchase _____ Mileage at Purchase _____

Contact Person during the purchase _____

Complaint DETAILS:

State the precise complaint you have:

Dealer Response DETAILS:

Person(s) at Dealership with whom you discussed your complaint: _____

What was the position or statement(s) of the Dealer regarding your complaint?

Any other information do you believe is useful to resolve this dispute?

As additional attachments to this complaint, please give front and back copies of ALL the paperwork related to your transaction or purchase

*DO NOT SEND the originals of the documentation you received from the dealer!

NOTARIZATION

The undersigned, under penalty of perjury, state under oath that the above facts and any additional, attached pages are true and correct. As to the information stated under as my belief, I believe those facts to be true and correct.

State of Arizona
County of Maricopa

Signature of Complainant

ss:

Sworn and Subscribed to before me this _____ day of _____, _____

Notary Republic

My commission expires _____