

OFFICIAL COMPLAINT FORM

STATE BOARD OF REGISTRATION OF USED MOTOR VEHICLE DEALERS
AND USED MOTOR VEHICLE PARTS DEALERS

MAIL TO:
Used Car/Used Car Parts Division
237 Coliseum Drive
Macon, Georgia 31217-3858

NAME & ADDRESS OF PERSON SUBMITTING COMPLAINT:
(NOT REQUIRED)

PERSON/BUSINESS AGAINST WHOM COMPLAINT BEING MADE:

PHONE #

PHONE #

DATE OF COMPLAINT:

TO EXPEDITE PROCESSING, PLEASE LIST THE SPECIFIC REASON(S) YOU ARE FILING THIS COMPLAINT. You may attach as many pages as necessary to provide details and further explanation of your complaint. BE SURE TO ATTACH COPIES OF ANY DOCUMENTS, PHOTOGRAPHS, OR OTHER INFORMATION THAT MAY BE PERTINENT TO THE MATTER.