



Fuel Dealer Complaint Form

Case No. _____ ☐ COMPLAINT ☐ VOLUNTARY STATEMENT File Date _____

I wish to file a complaint against the business or individual named below. I understand that the Department of Motor Vehicles DOES NOT represent private citizens seeking return of monies or other personal remedies as a result of contractual disputes or civil actions.

Person Filing Complaint:

Name _____ Day Time Phone _____
Address _____ Home Phone _____
City _____ State _____ Zip Code _____

Business or Individual Complaint Filed Against: Business License No. _____
(If applicable)

Business Name _____ Phone _____
Address _____
City _____ State _____ Zip Code _____
Representative's Name _____

Vehicle Involved: (if applicable)

VIN

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Year _____ Make _____ Model _____ Color _____

☐ Other complaint not involving a motor vehicle sale or repair.

Explain Complaint: (Please attach copies of any documents you have to support your complaint.)

I, _____ freely and voluntarily give this affidavit to the State of Nevada, Department of Motor Vehicles. I further certify and affirm that all information is true and correct to the best of my knowledge and that I will testify to these facts if requested to do so in any action brought against the business or individual named above.

Signatures must be original. Photocopies are not acceptable.

Signature of Complainant Date

Signature of Notary or Authorized DMV Representative Date