

STATE OF NEVADA
DEPARTMENT OF BUSINESS AND INDUSTRY
DIVISION OF MORTGAGE LENDING

COMPLAINT FORM

Mail To:
Division of Mortgage Lending
Attn: Consumer Complaints
7220 Bermuda Road, Ste. A
Las Vegas, NV 89119

Received Date:

Anonymous complaints will not be pursued by the Division

INSTRUCTIONS: USE YOUR MOUSE AND KEYBOARD TO FILL OUT THIS FORM IN YOUR WEB BROWSER AND THEN PRINT IT, OR PRINT OUT THE FORM AND TYPE OR PRINT LEGIBLY WITH AS MUCH INFORMATION AS IS KNOWN TO YOU.

INFORMATION ABOUT YOU

NAME (ENTER YOUR FULL NAME):

RESIDENCE ADDRESS (STREET ADDRESS, CITY, STATE AND ZIP CODE):

HOME TELEPHONE:

WORK TELEPHONE:

EMAIL ADDRESS:

INFORMATION ABOUT PERSON/COMPANY YOU ARE COMPLAINING AGAINST

1. FULL NAME OF BUSINESS, COMPANY, FIRM:

TELEPHONE NUMBER:

BUSINESS ADDRESS:

PERSON INVOLVED IN TRANSACTION, INCLUDE BUSINESS CARD IF AVAILABLE:

2. HAVE YOU CONTACTED THE COMPANY/PERSON REGARDING THE COMPLAINT?

NO YES IF, YES, PROVIDE THE FOLLOWING INFORMATION:

DATE (S) OF CONTACT:

PERSON (S) CONTACTED:

RESULTS OF CONTACT:

3. HAVE YOU FILED THIS COMPLAINT WITH ANOTHER LAW ENFORCEMENT OR CONSUMER PROTECTION AGENCY?

NO YES IF YES, COMPLETE THE FOLLOWING:

NAME OF AGENCY/CONTACT:

ADDRESS OF AGENCY:

RESULTS OF THAT COMPLAINT:

Please sign and date this form. The Division of Mortgage Lending will not process any unsigned, incomplete or illegible complaints.

Pursuant to NRS 645A.082(1), NRS 645B.092(1), NRS 645E.375(1) and Section 78(1) of R052-09, the permanent regulation implementing Assembly Bill No. 152 of the 75th Legislative Session (2009), this complaint form, all documents and other information which you submit to this office with the complaint form, and all documents and other information compiled as a result of an investigation conducted by this office to determine whether to initiate disciplinary action are confidential. Pursuant to NAC 645B.320(4), this office will provide a copy of the complaint form to the company or person against whom the complaint is filed so that that company or person may respond, in writing, to the complaint.

This office is prohibited by law from providing legal advice to private parties and cannot act as your private attorney. To preserve any legal rights you have, you may also wish to contact a private attorney. This office cannot negate a signed contract.

I hereby affirm under penalty of perjury that I am 18 years of age or older, that I have personal knowledge of the matters stated herein, and that the assertions contained in this complaint are true.

Signature:

Print Name:

Date:
