## **WEST VIRGINIA DIVISION OF LABOR**

## **Board of Manufactured Housing Construction & Safety**

1900 Kanawha Boulevard, East

State Capitol Complex - Builling 3, Room 200 - Charleston, WV 25305

Email: MHBoard@wv.gov \* Fax: (304) 558-2447 \* Main: (304) 558-7890

## **CONSUMER COMPLAINT**

Name:		Home Phone #:	
Cell #:	Email Address:		
Addroso:			
City:		State:	Zip:
Manufactured H	Home Information:		
Used:	N ew:		
Serial #:		Model:	
Size of Home:	e: Purchase Date:		
Manufacturer of	Home:	Make:	
Address:			
City:		State:	Zip:
Expiration Date	of Manufacturer Warranty:		
Dealer:			
Address:			
<b>0</b> 1.		<b>0</b>	Zip:
Home Installed b	py:		
Address:			
City:		State:	Zip:
Date of Installati	on:		
Is the home insta	alled on private property or in a mobile home	park?	
Has the home be	en moved from the original installation site?	Yes	No
List additions/alto	erations made to the home and the name of the	he contractor/pers	son doing the work.

Consumer Complaint:	
List each problem with your home below,	if necessary attach additional pages.
The list of documents below will be benef	icial to your case if you file a complaint:
Copies of all purchase agreem	ents and contracts;
Copies of all dealer and manuf	acturer work orders listing corrections to your home;
Documentation of contact with	the dealer and manufacturer advising each of problems
with your home. (If possible, by	v certified mail)
List other persons you have contacted re-	garding the problems with your home.
I agree to assign to the Board all rights an	d claims I may have relating to the repairs that I have
against the licensee(s) involved in the mai	nufacture, purchase or installation of my home.
Date	Homeowner Signature

The Division of Labor processes your personal information for appropriate and customary business purposes. Your personal information may be disclosed to other state agencies or third parties in the normal course of business as needed to comply with State or Federal Laws.