



CONSUMER COMPLAINT FORM

CONSUMER INFORMATION

Your Full Name _____
Address _____
City/State/Zip _____
Are you age 18 or older? ☐ Yes ☐ No E-mail Address _____
Home Phone () _____ Work Phone () _____
The best place and time to reach you from 8 a.m. to 5 p.m. is at work or home (circle one) at _____ (time).

COMPANY OR INDIVIDUAL ABOUT WHOM YOU ARE COMPLAINING

Company Name _____
Address _____
City/State/Zip _____
Telephone () _____
List the names of any individuals with whom you have had contact _____

ACCOUNT INFORMATION

Your account name (as company has it) _____
Your account number (as company has it) _____
Did you sign any papers? ☐ Yes ☐ No
Were they signed **at your home**? ☐ Yes ☐ No
Were you given a copy? ☐ Yes ☐ No

COMPLAINT INFORMATION

All complaints and accompanying information are presumed to be open records unless excepted pursuant to TEX. GOVT. CODE § 552.101 et seq. Information and records not excepted must, by law, be given to anyone who requests them.

Explain your complaint fully by attaching a description of the events in the order in which they happened. Enclose copies of all documents that relate to your complaint.

Have you contacted an attorney relative to this complaint? ☐ Yes ☐ No
Is there a court action pending? ☐ Yes ☐ No
What do you believe would be a fair resolution to this matter? _____

How did you find out about the OCCC? _____

By signing my name I affirm that the information provided on this form (and any attachments) is accurate to the best of my knowledge and I authorize you to relay this information to the individual or company about which I am complaining. If my complaint concerns violations of state or federal law outside OCCC jurisdiction, it may be forwarded to the appropriate agency.

Signature _____ Date _____

Note: You may either mail this form or return it as an attachment via e-mail. A signature is not required for those forms returned via e-mail, however, choosing to return the form via e-mail will also be considered an affirmation of the statements above.