K-35 Rev. 1-2025

STATE OF CONNECTICUT DEPARTMENT OF MOTOR VEHICLES DEALERS AND REPAIRERS DIVISION

On The Web At ct.gov/dmv

CASE NUMBER

DMV OFFICE DEALER LICENSE NUMBER USE ONLY

Mail your completed K-35 application, signed and dated by you, with legible copies of all related documents to the following: Department of Motor Vehicles, Consumer Complaint Center, 60 State St. Wethersfield, CT 06161-2010

DEALER LOCATION NUMBER

Copies of documents can include a sales purchase order, invoice, federal odometer statement, repair order, estimate, any authorization, statement from business, ect.

	BUSINESS NAME (As Shown on Invoice)			PERIOD VEHICLE IN CUSTODY OF BUSINESS (Dates)	
LICENSED DEALER OR	BUSINESS ADDRESS (Number and Street)			LICENSED DEALER OR REPAIRER PHONE NUMBER	
REPAIRER INFORMATION	(City or Town)	(State)	(Zip Code)	PERSON DEALT WITH	
	YOUR NAME			DATE OF BIRTH	DATE OF SERVICE/SALE
COMPLAINANT INFORMATION	YOUR ADDRESS (Number and Street)	(City or Town)	(State)	(Zip Code)	YOUR PHONE NUMBER, M-F 8 AM TO 4 PM *
	МАКЕ	MODEL		YEAR	MARKER PLATE NUMBER
VEHICLE					
INFORMATION	VEHICLE IDENTIFICATION NUMBER			CURRENT ODOMETER READING	ODOMETER READING AT TIME OF REPAIR OR SALE
YOUR E-MAIL ADDRESS				THE DEALER OR REPAIRER SHOULD BE GIVEN THE OPPORTUNITY TO RESOLVE THE COMPLAINT <u>PRIOR</u> TO NOTIFYING THE DMV. IF YOUR COMPLAINT IS RESOLVED AFTER SUBMISSION TO DMV, PLEASE MAIL A SIGNED AND DATED LETTER STATING SO.	
TYPE OF COMPLAINT MOTOR VEHICLE SALES TOWING / STORAGE OTHER:					
Please type a brief description of your complaint below:					



IMPORTANT INFORMATION:

• All complaints must be submitted by mail to the address above.

• Include readable copies of <u>ALL</u> sale or repair documents

• Incomplete complaints will not be investigated.

Please note that the DMV does not investigate complaints related to improper or negligent repairs, misdiagnosis, poor quality parts, paint or cosmetic work.

The above are all civil matters that consumers can pursue in civil court.

I am filing a complaint against the licensed business named above. I am requesting that the Department of Motor Vehicles assist me in resolving my problem to the extent provided by law.

SIGNATURE OF COMPLAINANT