

## West Virginia Department of Agriculture

Kent A. Leonhardt, Commissioner Joseph L. Hatton, Deputy Commissioner

## **Auctioneer Complaint Form**

| Party Complaining:                            |                          |                                    |                   |
|---|--------------------------|------------------------------------|-------------------|
| Name:   | Email:                   |                                    |                   |
| Mailing Address:                              | City:                    | State:                             | Zip:              |
| Phone:  |                          |                                    |                   |
| Complaint Against:                            |                          |                                    |                   |
| Name:   | Business Na              | me:                                |                   |
| Mailing Address:                              | City:                    | State:                             | Zip:              |
| Phone: Email:                                 |                          | Auctioneer # (if k                 | xnown):           |
| Complaint Details:                            |                          |                                    |                   |
| Location of Auction:                          | Client:                  |                                    |                   |
| Did you sign a contract? If yes, did y        | ou receive a copy?       | If available, attach a copy        | to this complaint |
| First type of contact between you and the auc | tioneer/business:        |                                    |                   |
| Advertisements for auctioneer appeared in pu  | blications/websites:     |                                    |                   |
| Advertisements for auction appeared in publi  | cations/websites:        |                                    |                   |
| Have you contacted the auctioneer/business r  | egarding your complaint? |                                    |                   |
| Have you filed this complaint with any other  | agency? If yes, what     | at agency?                         |                   |
| What action was taken?                        |                          |                                    |                   |
| Describe any legal action regarding this comp | plaint:                  |                                    |                   |
| Type of complaint:                            |                          |                                    |                   |
| □Auctioneering Without a License              |                          | □Theft of Client Property          |                   |
| $\Box$ Contract Breach                        |                          | $\Box$ Poor Performance for Client |                   |
| Unethical Conduct While                       |                          | $\Box \text{Improper Advertising}$ |                   |
| Performing Auction (s                         | pecify)                  | □Other:                            |                   |

| Witness Names                                     | Contact Information (phone or e-mail) |
|---|---------------------------------------|
|   |                                       |
|   |                                       |
|   |                                       |
|   |                                       |
| How would you want your complaint to be resolved? |                                       |
|   |                                       |
|   |                                       |
|   |                                       |
|   |                                       |
|   |                                       |
|   |                                       |

## Please provide copies of contracts, advertisements, receipts, correspondence, and any other documentation you have related to your complaint.

By submitting this form:

- (1) I acknowledge and agree that the information on this form may be shared with the party complained against and/or other state agencies; and
- (2) I hereby certify that all information on this form is true and accurate to the best of my knowledge and beliefs, and that I have the legal authority to submit this form.

Signature:

Printed Name

Date

Return form and attachments to:

wvauctioneers@wvda.us OR

West Virginia Department of Agriculture Attn: Auctioneers 1900 Kanawha Blvd., E Charleston, WV 25305

Phone: 1-304-558-3200