



# Motor Vehicle Sales Authority of BC Consumer Complaint Form

There are 3 steps to file a complaint against a licensed BC motor dealer:

**Step 1.**

Fill out the Consumer Complaint Form, print a copy and sign it.

**Step 2.**

Attach **required documentation**:

- a) A copy of your current Vehicle Registration Form ( if applicable )
- b) A copy of Sale or Lease Agreement ( if applicable )
- c) For a deposit complaint, proof of payment of the deposit and a copy of the deposit agreement or receipt

Attach all relevant **supporting documentation**, including ICBC Transfer Tax Form APV9T, worksheets, deposit receipts, ICBC vehicle damage enquiries, CarProof and CarFax reports done after purchase/lease, or other.

**Step 3.**

Send your Consumer Complaint Form with attachments to the Motor Vehicle Sales Authority of British Columbia by mail, or by fax, or by e-mail:

Mailing address: Motor Vehicle Sales Authority of BC  
Suite 208 - 5455 152<sup>nd</sup> Street, SURREY, BC V3S 5A5

Fax number: (604) 574-5886

E-mail address: [enquiry@mvsabc.com](mailto:enquiry@mvsabc.com) (You will need to scan your complaint form and **all** attachments )

**IMPORTANT:** Missing and inaccurate information will result in handling delays and your complaint application may be returned to you.

## Complainant's Contact Information

**IMPORTANT:** Complainant is the person who entered into the transaction with the dealership and whose name appears on the sale, lease, consignment or deposit agreement/worksheet.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

Cell phone \_\_\_\_\_ E-mail \_\_\_\_\_

**If a representative is acting on your behalf, please provide your representative's contact information:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

Cell phone \_\_\_\_\_ E-mail \_\_\_\_\_

## Complaint Against

Name of Motor Dealer \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Salesperson \_\_\_\_\_ Manager \_\_\_\_\_

## Vehicle and Transaction Information

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

VIN \_\_\_\_\_ or Registration Number \_\_\_\_\_

Odometer reading at purchase \_\_\_\_\_ now \_\_\_\_\_

Financed                   Leased                   Cash                   With trade-in: Yes     No

Date of Purchase/Lease/Consignment/Payment of the deposit \_\_\_\_\_

Price \_\_\_\_\_ (before taxes and extras)                  Extended Warranty: Yes     No

Percentage vehicle is / was / was intended to be used for: \_\_\_\_\_% business purposes \_\_\_\_\_% personal use

## Details of Your Complaint ( Preferably typed )

Please list the events related to your complaint in the order they occurred prior to your purchase, lease, consignment or payment of the deposit. Include names of salesperson and/or manager you dealt with. If you contacted the motor dealer to try to resolve your dispute, provide dates and contents of phone calls, letters and other discussions you had with the motor dealer. If needed, please attach a more detailed statement to this form.

What do you want the dealership to do to resolve your complaint? \_\_\_\_\_

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Have you made this known to the dealer? Yes  In writing  ( Please attach a copy ) No   
Verbally  ( Who did you speak to and when? )

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Did you receive a response from the dealership? Yes  In writing  ( Please attach a copy ) No   
Verbally  ( What was the response? )

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### **Required and Supporting Documents**

Did you receive the following documents / information at the time of the transaction? ( Please attach a copy if applicable )

Worksheet	Written <input type="checkbox"/>	A copy attached <input type="checkbox"/>	None <input type="checkbox"/>	N/A <input type="checkbox"/>	
Deposit agreement	Written <input type="checkbox"/>	A copy attached <input type="checkbox"/>	None <input type="checkbox"/>	N/A <input type="checkbox"/>	
Deposit receipts	Written <input type="checkbox"/>	A copy attached <input type="checkbox"/>	None <input type="checkbox"/>	N/A <input type="checkbox"/>	
Sale agreement	Written <input type="checkbox"/>	A copy attached <input type="checkbox"/>	None <input type="checkbox"/>	N/A <input type="checkbox"/>	
Finance agreement	Written <input type="checkbox"/>	A copy attached <input type="checkbox"/>	None <input type="checkbox"/>	N/A <input type="checkbox"/>	
Lease agreement	Written <input type="checkbox"/>	A copy attached <input type="checkbox"/>	None <input type="checkbox"/>	N/A <input type="checkbox"/>	
Warranty information	Written <input type="checkbox"/>	A copy attached <input type="checkbox"/>	Verbal <input type="checkbox"/>	None <input type="checkbox"/>	N/A <input type="checkbox"/>
Mechanical condition report	Written <input type="checkbox"/>	A copy attached <input type="checkbox"/>	Verbal <input type="checkbox"/>	None <input type="checkbox"/>	N/A <input type="checkbox"/>
Vehicle history report	Written <input type="checkbox"/>	A copy attached <input type="checkbox"/>	Verbal <input type="checkbox"/>	None <input type="checkbox"/>	N/A <input type="checkbox"/>
Vehicle registration	Written <input type="checkbox"/>	A copy attached <input type="checkbox"/>	None <input type="checkbox"/>	N/A <input type="checkbox"/>	
ICBC tax transfer form (APV9T)	Written <input type="checkbox"/>	A copy attached <input type="checkbox"/>	None <input type="checkbox"/>	N/A <input type="checkbox"/>	

Do you have other related documents, including vehicle history reports done after the transaction? ( If yes, please list and attach )

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**Additional information**  
**(That will not affect your complaint)**

**How did you find out about the VSA?**

Advertising :                      Print     Radio     TV     Online     Other  \_\_\_\_\_

Automotive Industry :            ARA     NCDA     RVDA     Other  \_\_\_\_\_

Consumer Organization :        BBB     Consumer Protection BC     Other  \_\_\_\_\_

Auto Insurance Broker     BCAA     ICBC     Automotive Dealer  \_\_\_\_\_

Internet Search     News Feature     Personal Referral     Lawyer     Courts     Police

Other  \_\_\_\_\_

**Was this your first vehicle purchase?**      Yes       No

**How did you pick the dealership that you bought from?**

Advertising:    Print     Radio     TV     Online     Other  \_\_\_\_\_

Word of Mouth     Drop In     Previous Purchase     Other  \_\_\_\_\_

**Did you take the vehicle for a mechanical inspection prior to purchase / lease ?**

Yes     No     Dealer Provided     Dealer Did Not Allow

**Terms of Service**

**Your private information**

The information that you provide is collected in accordance with the VSA Privacy Policy and is needed for your complaint to be evaluated and for the VSA to conduct an investigation or undertake administrative action. This information may need to be shared with the dealership against whom the complaint has been made.

**Your responsibilities**

By sending a complaint to the VSA you are authorizing the release of this information for investigative and statistical purposes. You are also acknowledging that the information is true and accurate to the best of your knowledge.

\_\_\_\_\_  
Complainant's Signature

\_\_\_\_\_  
Complainant's Representative Signature

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date