TENNESSEE DEPARTMENT OF SAFETY AND HOMELAND SECURITY

ODOMETER COMPLAINT FORM

COMPLAINANT

Name of Person Submitting Complaint | (Area Code) Phone Number

Street Address | City | State | Zip Code

PREVIOUS OWNER

Name of Person or Dealer from Whom Vehicle was Purchased

Street Address | City | State | Zip Code

SPECIFY AND ENCLOSE: Copies of any invoice, Bill of Sale, Odometer Statement, or other documents that will aid in the investigation of your complaint.

VEHICLE DESCRIPTION

Year | Make | Model | Identification Number

Title Number | Purchase Price | Date of Purchase

Current Odometer Reading | Odometer Reading at Time of Purchase

Is this vehicle still in your possession? ☐ YES ☐ NO

If not, give a brief explanation (if sold, state to whom sold, address, and date of sale)

Have you contacted anyone about this complaint? _____ Date Contacted: _____

Name of Person Contacted: _____

State why you believe the odometer reading on this vehicle has been misrepresented or tampered with.
(Be specific. Use reverse side if necessary).

NOTE: An investigation on your complaint will be undertaken promptly upon receipt of this form. Please note that such an investigation is dependent upon timely receipt of title information from other states.

Please mail your completed complaint form to the THP/CID Region office that is circled.

THP/CID	THP/CID	THP/CID	THP/CID
Region 1	Region 2	Region 3	Region 4
1609 Walters State CC Drive, Unit 3	1420 Neal Street, #102	301 Plus Park Drive	3012 Greystone
Morristown, TN 37813	Cookeville, TN 38501	Nashville, TN 37243	Jackson, TN 38305
(423) 587-7081	(931)-528-4130	(615) 251-5187	(731) 668-9644

NOTE: The Tennessee Consumer Protection Act (TCA 47-18-109) provides for a private right of action by a consumer but legal actions under this act must be brought within one (1) year from the discovery of the odometer rollback. Under Federal Motor Vehicle Information and Cost Savings Act, legal actions must be brought within (2) two years from the date of discovery. If you are considering legal action against the party named in your complaint to this Division, please be sure that you contact your private attorney regarding your legal rights.

Signature of Complainant | Date

NO INVESTIGATION WILL BE MADE UNLESS SIGNED