

Only to be used for auctions occurring on or BEFORE December 31, 2023.

<u>NOTICE</u>: When filling out this form, please keep in mind that a copy of this complaint will be forwarded to the individual and/or entity for which the complaint is against providing them an opportunity to respond to the allegations.

| COMPLAINANT INFORMATION | | | | |
|-------------------------|-------|------------------|--|--|
| Name | | Telephone Number | | |
| Mailing Address | | Email Address | | |
| City | State | ZIP Code | | |

| COMPLAINT AGAINST | | | | |
|---|-------|------------------|--|--|
| Name of Auctioneer and/or Auction Clerk | | Telephone Number | | |
| Mailing Address | | Email Address | | |
| City | State | ZIP Code | | |

COMPLAINT DETAILS

Describe the facts/circumstances of your complaint in complete detail. Include the following: any attempts to rectify the situation; dates; names; addresses; phone numbers of individual(s) involved. If possible, please provide a copy of the auction bill or auction advertisement.

Attach additional pages if necessary.

AUCTION SALE TYPE

Mark "X" for the auction type that applies.

PUBLIC AUCTION – Public auction conducted by a licensed auctioneer where bids are placed and accepted in person.

PUBLIC AUCTION WITH INTERNET BIDDING OPTION – Public auction conducted by a licensed auctioneer where bids are placed and accepted in person or via the internet during the public auction event.

INTERNET AUCTION – Selling or offering for sale either real or personal property at public auction **exclusively** via the internet. Typically closes automatically at a specified time and date.

| MARK "X" TO ANSWER THE FOLLOWING QUESTIONS | | | YES | NO |
|---|---------------------------------------|----------------------------|-----|----|
| 1. Did you sign a written contract? If Yes, attach a copy of the contract. | | | | |
| 2. Were there any witnesses? If Yes, please include their name and contact information below. | | | | |
| NAME | ADDRESS | PHONE NUMBER | | |
| | | | | |
| 3. Have you consulted with an a | ttorney? If Yes, please provide their | contact information below. | | |
| NAME | ADDRESS | PHONE NUMBER | | |
| 4. Is any court action pending or completed? If Yes, please identify the case below. | | | | |
| 5. What is your resolution expec | tation? | | | |

DOCUMENTS

Attach copies of any supporting documents you may have, such as:

- written contracts,
- advertisements,
- canceled checks,
- invoices,
- letters,
- witness statements, and/or
- other documentation you believe will aid in establishing a basis of facts.

SUBMIT COMPLETED FORMS AND DOCUMENTS TO

| BY MAIL | BY EMAIL |
|---|--------------------------|
| Public Service Commission Compliance Division 600 E. Boulevard Ave., Dept. 408 Bismarck, ND 58505-0480 | pscauctionlicense@nd.gov |

By signing this form, I acknowledge that the information and statements contained in this complaint and attached documents are true and accurate to the best of my knowledge.

| Signature of Individual Filing Complaint | |
|--|--|
|--|--|

Date