

STATE OF WEST VIRGINIA
OFFICE OF THE ATTORNEY GENERAL
PATRICK MORRISEY
CONSUMER PROTECTION DIVISION
1-800-368-8808 or 304-558-8986

www.wvago.gov E-Mail: consumer@wvago.gov

## **CONSUMER MORTGAGE COMPLAINT**

1. P	ARTY COMPLAINING	2. COMPLAINT AGAINST					
□ Mr.	□ Mrs. □ Ms.						
Name	:	Bank Name:					
Mailin	g Address:	Address:					
City:	State:	City:					
Count	y: Zip Code:	State: Zip Code:					
Home	Telephone:	Telephone:					
Work	Telephone:	Name of person you dealt with:					
Cell T	elephone:	Title:					
Email:							
Best t	ime to contact me:						
Prope	rty Address - If different than the mailing address	S:					
3. A.	feel free to answer, "I do not k	ease provide as much information as you can. If you do not know the answer to a question, feel free to answer, "I do not know." You may supplement your answers later.  o do you receive your monthly mortgage statements from? Please provide the name, address, and telephone of the current mortgage servicer:					
B.	Who did you make your original mortgage loar number of the <b>original mortgage lender:</b>	Who did you make your original mortgage loan with? Please provide the name, address, and telephone number of the <b>original mortgage lender</b> :					
C.	Who is the owner of your mortgage loan? Pleamortgage loan owner:	ase provide the name, address, and telephone number of the					
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A.	Have you received a foreclosure <b>notice</b> ?	□ Yes	□ No				
	If yes, please provide the <b>Trustee</b> information:						
B.	Have you received a foreclosure sale date?	□ Yes	□ No				
	If yes, please provide the date and time set for the	he sale:					
C.	Has a foreclosure already occurred?	□ Yes	□ No				
	If yes, please provide the date:						
D.	Have you received an order of eviction?	□ Yes	□ No				
	If yes, please provide the date:						
	Do your currently live in the home?	□ Yes	□ No				
	Have you attempted to work with your mortgag	ge servicer?	If yes, please	describe your	experience in	detail below.	
	Have you filed this complaint with any other agen	ncy or organiz	ation?	□ Yes	□ No		
	If yes, please identify the organization and explain	n any action t	hat may have b	een taken:			
	Describe any legal action you have taken:						
	If statements or promises were If you need addition please continue on a separa	not in writin nal space to ate page an	ng, describe to tell what hap d attach it to	hem in Ques opened, your compla	stion 9.		
	Attach copies of all documents – front and back – related to your mortgage.  If statements or promises were not in writing, describe them in Question 9.  If you need additional space to tell what happened,  please continue on a separate page and attach it to your complaint.  Please DO NOT send original documents.						

PLEASE CONTINUE TO THE NEXT PAGE \_

ow do you want your complaint resolved?				
The information you provide will be used in efforts to resolve your problem and may be shared with the party complained against. It may also be used to enforce applicable state laws.  I hereby authorize any party to whom the Attorney General directs this complaint to release any and all information about this matter, including account information, to the Attorney General's Office.				
URE (Required) DATE				
1				