



Consumer Complaint Form

Please complete appropriate section(s) below, then “save as” using the following format:

- “Last Name, First Name, Consumer Complaint, MM/DD/YYYY” and email to service@summitsettlement.net
- File Name Example: *Smith, John, Consumer Complaint, 04/01/2021*

Date of Inquiry:

MM/DD/YYYY

Consumer Contact Information:

Name(s) (Last, First)

Property Address (Street, City, State, Zip)

Contact Address (if different from property address)

Contact Phone Number

Additional Contact Phone Number

Transaction Information:

Agent File Number

Policy Number

Transaction Type (Purchase, Refi, REO, etc.)

Briefly describe the nature of the consumer’s inquiry including dates of any conversations, phone calls, and names (including title and company affiliation) of those whom consumer has spoken to.

Indicate whether additional information or documentation is attached under separate cover.

Advise Consumer that this will be routed to **Contact Name, Contact Title.**

Name / Title of person completing form: _____