

## Mississippi Real Estate Commission Home Inspector Division

LeFleur's Bluff Tower, Suite 300 4780 1-55 North, Jackson, MS 39211 P. O. Box 12685, Jackson, MS 39236-2685 Telephone (601) 321-6970 Fax (601) 321-6955

## SWORN STATEMENT /COMPLAINT FORM

- 1. Please mail the **ORIGINAL** of the Complaint Form to the Mississippi Real Estate Commission, Home Inspector Division at P.O. Box 12685, Jackson, Mississippi; 39236-2685.
- 2. Type or print the complaint clearly.
- 3. State facts briefly and clearly.
- 4. Furnish full names and complete addresses of all witnesses (persons with acknowledge knowledge of the facts).
- 5. Furnish copies of all contracts, inspection reports, and other pertinent documents.

## **COMPLAINT FORM MUST BE NOTARIZED:**

Name of Complainant(s)		_	Phone Number
Address	City	State	Zip
	·		•
Name of Home Inspector			Phone Number
Address	City	State	Zip
Name of Home Inspector			Phone Number
Address	City	State	Zip

State ofMississippi County of			
	being first duly sworn deposes and says that:		
(Complainant's Name)			
<b>Brief Statement of Facts Concerning Complaint:</b>			
Sworn before me this the d	ay of, 20		
SEAL			
DLIIL			
	NOTARY PUBLIC		