

DATE

RE: Consumer Complaint #:

Homeowner(s): Manufacturer:

Retailer: Installer: Serial #:

DISPUTE RESOLUTION INSPECTION REPORT

Please find enclosed information regarding the inspection performed by the Tennessee Manufactured Housing and Modular Building Section ("Section") on DATE, in connection with Consumer Complaint #XXXXXXXXXX. The following individuals were present for the inspection:

- NAME
- NAME

The items cited in this inspection report indicate a possible failure to conform in accordance with the provisions of the Manufactured Home Procedural and Enforcement Regulations, 24 C.F.R. § 3282, promulgated under the authority of the National Manufactured Housing Construction and Safety Standards Act of 1974 ("Standards") and compliance with Tenn. Code Ann. § 68-126-201 et seq. [Uniform Standards Code for Manufactured Homes Act].

<u>State SAA:</u> As the State Administrative Agency ("SAA") for the State of Tennessee, we are forwarding this complaint in accordance with the provisions of the Standards.

<u>Manufacturer:</u> You are required to investigate and/or correct items listed under **CONCLUSION "A"** no later than thirty (30) days from receipt of this report. Additionally, you are required to detail any actions taken on the enclosed response form and return the form to the Section no later than thirty (30) days from receipt of this report. You shall also attach any work orders or other pertinent documentation to the response form.

Retailer/Installer: You are required to investigate and/or correct items listed under CONCLUSION "B" and/or CONCLUSION "C," as applicable, no later than thirty (30) days from receipt of this report. Additionally, you are required to detail any actions taken on the enclosed response form and return the form to the Section no later than thirty (30) days from receipt of this report. You shall also attach any work orders or other pertinent documentation to the response form.

All Parties:

No further request will be forwarded from this office requesting this information. If a timely response is not received, this office will forward the matter to the Legal Division for further action.



Please be aware homeowners may be contacted for verification of any repairs or corrections made once the required information and documentation is provided.

Additionally, the consumer complaint file may be reviewed by the Department during any record review proceedings or monitoring inspections to ensure that proper procedures are being followed per the Standards.

Our inspection findings, observations and conclusions are as follows:

INSPECTION FINDINGS:

| Item #1: | COMPLAINT: |
|----------|------------|
| | FINDING: |
| | NOTE: |
| | |
| Item #2: | COMPLAINT: |
| | FINDING: |
| | NOTE: |
| | |
| Item #3: | COMPLAINT: |
| | FINDING: |
| | NOTE: |
| | |
| Item #4: | COMPLAINT: |
| | FINDING: |
| | NOTF: |



| Item #5: | COMPLAINT: |
|----------|------------|
| | FINDING: |
| | NOTE: |
| Item #6: | COMPLAINT: |
| | FINDING: |
| | NOTE: |
| Item #7: | COMPLAINT: |
| π7. | |
| | FINDING: |
| | NOTE: |
| Item #8: | COMPLAINT: |
| | FINDING: |
| | NOTE: |
| | |
| Item #9: | COMPLAINT: |
| | FINDING: |
| | NOTE: |



Item #10: **COMPLAINT:**

FINDING:

NOTE:

CONCLUSIONS:

MANUFACTURER:

RETAILER:

N/A:

COMPLETED:

Resource Information

Tennessee Division of Consumer Affairs Tennessee Attorney General's Office P.O. Box 20207 Nashville, TN 37202-0207 P. 615-741-4737 F. 615-532-4994

Better Business Bureau Upper Cumberland Branch 18 North Jefferson Street Cookeville, TN 38501 P. 931-520-0008 F. 931-520-0009

Email: BBBCumberland@gobbb.org

Sincerely,

Renee Reynolds
Consumer Complaint Specialist/SAA
Dept. of Manufactured Housing
TN State Fire Marshal's Office
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Renee.Reynolds@tn.gov