



MANUFACTURED HOME CONSUMER COMPLAINT

State Form 54450 (9-10)

**INDIANA DEPARTMENT OF HOMELAND SECURITY
DIVISION OF FIRE & BUILDING SAFETY
FIRE & BUILDING CODE ENFORCEMENT**
302 West Washington Street, Room E241
Indianapolis, IN 46204
Telephone: (317) 232-1407
Fax: (317) 233-0307
www.in.gov/dhs



- INSTRUCTIONS:**
1. Please type or print clearly.
 2. Please list each problem separately by room and attach on a separate sheet of paper.
 3. Include the following information, if applicable (**do not send originals**):
 - a. Local building permits and inspection records
 - b. Copies of correspondence, work orders by manufacturer or dealer, and pictures
 4. Mail completed form to the Indiana Department of Homeland Security at the above address.

CONSUMER INFORMATION

Name of consumer		E-mail address
Address of consumer (number and street, city, state, and ZIP code)		
Telephone number ()	Work telephone number ()	Cellular telephone number ()

DESCRIPTION OF MANUFACTURED HOME

Name of manufacturer		
Address of manufacturer (number and street, city, state, and ZIP code)		
HUD certification label number(s)		
Type of home (check one) <input type="checkbox"/> Single <input type="checkbox"/> Multi	Size of home	
Date of purchase (month, day, year)	Date of manufacture (month, day, year)	Date of installation (month, day, year)
Name of dealer		
Address of dealer (number and street, city, state, and ZIP code)		
Name of installer		
Address of installer (number and street, city, state, and ZIP code)		
Name of contact person		
Signature of owner		Date (month, day, year)