



KENTUCKY BOARD OF AUCTIONEERS

656 Chamberlin Avenue, Suite B
Frankfort, Kentucky 40601
(502) 564-7760
auctioneers.ky.gov

_____ CASE NO.

COMPLAINT FORM

COMPLAINANT INFORMATION

Your Name				Phone
Address	City	State	Zip	Email

RESPONDENT INFORMATION

Auctioneer's Name				License Number
Business Name				Phone
Address	City	State	Zip	Email

PRELIMINARY QUESTIONS

1. Have you communicated in writing (letter / text / email) with the auctioneer regarding the subject matter of the complaint? Yes No
 - a. If yes, please attach a copies of those communications and any responses you received.
2. Has legal action been initiated in this case? Yes No
 - a. If yes, please attach copies of all legal pleadings filed in the case.
 - b. If yes, please provide contact information for your lawyer if you have one.
3. Did you sign a contract with the auctioneer? Yes No
 - a. If yes, please attach a copy of the contract.

COMPLAINT DETAILS

In the space provided below, describe the facts of your complaint in the order in which they occurred, stating the specific provisions of KRS Chapter 330 or 831 KAR Chapter 1 you allege were violated. Please either type or print clearly. You may attach additional sheets if necessary.



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PROOF OF CLAIM

Pursuant to KRS Chapter 330, all claims considered for reimbursement from the Auctioneer's Education, Research and Recovery Fund must be properly supported, made in writing and submitted to the Board within twelve (12) months of the act of the auctioneer giving rise to your loss. Claims may be considered by the Board upon conclusion of a final order entered by the Board, or by the court, if appealed. Only the value of actual property can be recovered. Emotional damages or expenses related to the complaint process will not be reimbursed.

In the space provided below, please present an itemized list of all property for which you claim reimbursement. Attach additional pages as necessary. Additionally, attach any documents that may be useful in determining a fair market value for the item, such as copies of pictures, appraisals, deeds, titles, and verified sales of similar items.

CERTIFICATION

I certify that the information provided in this Complaint and Proof of Claim is true and accurate to the best of my knowledge. I realize the serious nature of filing such a complaint and realize that there may be penalties for false or misleading statements concerning such complaint.

Complainant Signature: _____ Date: _____

Sworn to before me this _____ day of _____, _____

Notary Public State of _____

County of _____

My Commission Expires _____

Notary Signature _____

Notary Seal
