

**NEBRASKA PUBLIC SERVICE COMMISSION  
HOUSING AND RECREATIONAL VEHICLE DEPARTMENT  
300 THE ATRIUM 1200 "N" STREET  
P.O. BOX 94927  
LINCOLN, NE 68509-4927**

**MODULAR HOUSING UNIT CONSUMER COMPLIANT**

Consumer Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

MODULAR HOUSING UNIT IDENTIFICATION

Manufacturer: \_\_\_\_\_ State: \_\_\_\_\_

Serial Number: \_\_\_\_\_ NE Modular Seal Number: \_\_\_\_\_

Retailer's Name: \_\_\_\_\_

Retailer's City and State: \_\_\_\_\_

NATURE OF COMPLAINT

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(Please attach additional sheets if necessary) Signature: \_\_\_\_\_