



TAX AUTHORITY COMPLAINT FORM

DATE OF COMPLAINT: _____ COUNTY: _____

ENTITY FILING(TAC, CAD, OTHER): _____

NAME OF CLERK OR PERSON FILING COMPLAINT: _____

PHONE NUMBER: (____) _____ EMAIL: _____

BUSINESS NAME: _____

DBA: _____ LICENSE OR "P" NUMBER: _____

ADDRESS: _____

CITY: _____ State: _____ ZIP _____

PHONE NUMBER: (____) _____

CONSUMER CAME TO TAX OFFICE TO TRANSFER TITLE AFTER PURCHASE FROM DEALER (Vehicle is NOT in excess of 11,000 lbs) [TRANSPORTATION CODE 501.0234] (TT)

CONSUMER NAME: _____ DATE OF SALE: _____

ADDRESS: _____

CITY: _____ State: _____ ZIP _____

PHONE NUMBER: (____) _____

WAS CONSUMER ASKED IF DEALER WAS PRESENT? YES NO

ATTACHMENTS: Please attach sales documents presented by consumer and 130-U and other documents issued by your office.

DEALER HAS BEEN IN BUSINESS FOR AT LEAST 1 YEAR AND HAS FAILED TO SELL AT LEAST 5 VEHICLES (Wholesale and retail sales combined) FOR THE YEAR ENDING DECEMBER 31, _____ [TRANSPORTATION CODE 503.038 (a) (9)] (RA)

VEHICLE INVENTORY TAX VIOLATION (VT):

DEALER FAILED TO FILE INITIAL DECLARATION 30 DAYS AFTER COMMENCING BUSINESS [TAX CODE 23.121 (f)]

DEALER FAILED TO FILE ANNUAL DECLARATION FOR TAX YEAR(S) [TAX CODE 23.121(f)]

DEALER FAILED TO FILE MONTHLY REPORT(S) [TAX CODE 23.121 (f)] (INCLUDE MONTH AND YEAR).

MAIL TO:

Texas Department of Motor Vehicles
Enforcement - Tax Complaints
4000 Jackson Ave
Austin, Texas 78731
888-368-4689 * 512-465-4204
OR FAX WITH ATTACHMENTS TO :
512-465-5634

THE TEXAS DEPARTMENT OF MOTOR VEHICLES MAINTAINS THE INFORMATION COLLECTED THROUGH THIS FORM. WITH FEW EXCEPTIONS YOU ARE ENTITLED ON REQUEST TO BE INFORMED ABOUT THE INFORMATION THAT WE COLLECT ABOUT YOU. UNDER §§552.021 AND 552.023 OF THE TEXAS GOVERNMENT CODE YOU ALSO ARE ENTITLED TO RECEIVE AND REVIEW THE INFORMATION. UNDER §559.004 OF THE GOVERNMENT CODE YOU ARE ALSO ENTITLED TO HAVE US CORRECT INFORMATION ABOUT YOU THAT IS INCORRECT.