

**STATE OF WISCONSIN**  
DEPARTMENT OF FINANCIAL INSTITUTIONS



**Return Form To:**

Department of Financial Institutions  
WCA Section  
PO Box 8041  
Madison, WI 53708-8041

(800) 452-3328  
(608) 264-7969  
TDY (608) 266-8818  
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[www.wdfi.org](http://www.wdfi.org)

**MORTGAGE BANKER/BROKER COMPLAINT**

Completion of this form is voluntary. Information requested provides statistical information for our office. This form is a public record and personally identifiable information may be shared with other State or Government agencies.

YOUR INFORMATION			THE BUSINESS YOUR COMPLAINT IS AGAINST		
Name			Name		
Address			Address		
City	State	Zip Code	City	State	Zip Code
Reach me by phone between 8 a.m. and 4 p.m. at: (     )     )			Name of person you dealt with:		
Account number with business, if any:			Phone number: (     )     )		
E-mail address:					

1) The activity or practice of the business you are questioning:

- |   |   |
|---|---|
| <input type="checkbox"/> Request to falsify application/mortgage documents          | <input type="checkbox"/> Failure to timely provide loan per agreement       |
| <input type="checkbox"/> Forgivable second mortgages                                | <input type="checkbox"/> Failure to explain loan requirements               |
| <input type="checkbox"/> Falsified appraisals                                       | <input type="checkbox"/> Payment dispute                                    |
| <input type="checkbox"/> Request to create different versions of mortgage documents | <input type="checkbox"/> Change rate and terms without knowledge or consent |
| <input type="checkbox"/> Addition of undisclosed fees or costs                      | <input type="checkbox"/> Falsified gift letter                              |
| <input type="checkbox"/> Collection practices                                       | <input type="checkbox"/> Escrow   |
| <input type="checkbox"/> Prepayment penalty   | <input type="checkbox"/> Other _____  |

2) When did you complete the loan application? Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

3) What type of loan did you apply for (first, second, fixed, adjustable etc.)? \_\_\_\_\_

4) At the time of application or within three days of signing the application did you receive the following?

Good Faith Estimate	_____ Yes _____ No	Truth In Lending Statement	_____ Yes _____ No
Pamphlet entitled Settlement Costs	_____ Yes _____ No	Adjustable Rate Mortgage Booklet	_____ Yes _____ No

5) Please list any other materials you received prior to paying the application fee, such as a mortgage broker contract or disclosure containing an itemization and explanation of all fees and costs to you.

6) What was your understanding about what you may receive and when you might expect it?

7) Prior to the time you paid your application fee, were you told about lock-in agreements and/or what would occur in case you were unable to obtain a loan for whatever reason? Was this information in writing? Please describe any information you were given.

8) Have you contacted the business about this complaint?

No       Yes      When: \_\_\_\_\_

Results of the contact:

9) Have you filed this complaint with any other agency?

No       Yes      Agency name: \_\_\_\_\_

10) Have you contacted a private attorney?       No       Yes

Has legal action been started?       No       Yes

Describe your complaint and the events in the order they happened, including specific dates and the activities or practices to which you object. **IMPORTANT: Please attach copies of any documents, such as a contract, advertisements, good faith estimates, letters, etc., which are pertinent to your complaint.**

What resolution do you suggest?

The above statement is true and accurate to the best of my knowledge.

Your signature \_\_\_\_\_ Date \_\_\_\_\_

The information you provide will be used in efforts to resolve your problem and may be shared with the party complained against. It may also be used to enforce applicable state laws. This document can be made available in alternate formats upon request to qualifying individuals with disabilities.