

Calgary:
301; 7015 Macleod Trail South
Calgary AB T2H 2K6 Canada
www.servicealberta.ca

Edmonton
3rd Floor, Commerce Place
10155 102 Street, Edmonton, AB
T5J 4L4

For telephone inquiries, please phone: 1-877-427-4088

Collections Consumer Complaint Assessment Form

Consumer Name: _____

Current Contact Information: _____
(Address, City, Postal Code)

(Home Phone, Cell Phone, Work Phone, Email)

Business Name (Complained Against): _____

Name of Representative: _____ Title of Position: _____

Address:

Phone: _____ Email: _____

Other Relevant Individuals: _____

Address: _____

Phone: _____ Email: _____

DETAILS OF THE COMPLAINT

Provide a complete summary describing your concerns. Noted below are questions required to assess your allegations. Where applicable, answer all questions that apply below. You are not limited to the questions below. Provide a complete timeline and add additional details at the bottom if needed.

- Identify if the calls were phone numbers showing on your call display or if you spoke with anyone.
- Identify on what occasions no message was left and/or no discussion took place.
- Identify how you know what business contacted or attempted to contact you.
- Provide the dates and times of every contact including the specifics discussed during the call (or attempted contact).
- Provide the name of all collection agents who called or left messages.
- If possible, complete copies of any recordings and proof the recordings were made on the date specified.
- If you have provided any notice or request for information, provide that evidence.
- Complete copies of all correspondence to and from the agency and agents representing the agency.
- If you are the debtor, provide information on the debt stated to be owed, name of creditor and amount owed.
- If you are the debtor, when was the last time you made a payment or acknowledged the debt? Provide copies of any payments made and/or the dates of last acknowledgement.

Provide details of your complaint.

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DOCUMENTATION

Please check the boxes that correspond to the documents you are providing.

- ☐ All Correspondence to/from the company
- ☐ All Documentation to/from the company
- ☐ Any recordings of calls

ACKNOWLEDGEMENT AND DECLARATION

The review of information by this department will be with the understanding that the role of the CIU is limited to determining if an offence under our authority has been committed and not to negotiate on your behalf. Please note that not all complaints result in the opening of an investigation. Further information may be requested to assist in providing the most appropriate referral (if applicable). A final determination will be made after a complete review.

Personal information is collected for the purpose of assessing consumer complaints. Information collected will be used for investigative and non-investigative purposes. Collection is authorized under section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act and is managed and protected in accordance with the Act. Questions about the collection and use of information can be directed to the Alberta Government, Director of Consumer Investigations Unit at 1-877-427-4088.

The submission of this complaint confirms your review and acceptance of this acknowledgement and declaration.

Signature: _____ Date: _____