MOTOR FUEL MARKETING COMPLAINT FORM

SECTION I
Complaint Filed By:

(Corporate Name) (Contact)

(Corporate Address)

(City) (County) (State) (Zip)

(Telephone) (Fax)

SECTION II
Complaint Filed Against:

(Name of Business)

(Complete Physical Address)

(City) (County) (State) (Zip)

(Telephone) (Fax)

SECTION III
If different from above, list the business name, physical address, and telephone number of your business in
direct competition with the business in which you are complaining:  (Must be in the same geographical area of
effective competition)

Name of business: ________________________________ Telephone: (______)_____________________

Physical Address: ________________________________ City: ____________________________ Zip: _______

SECTION IV
The business this complaint is filed against appears to be in violation of Florida’s Motor Fuel Marketing Practices Act
(Section 526.301-526.3135, Florida Statutes) by selling their motor fuel as follows:

Grade: __________________ Dates Sold: __________________ at $________ per gallon
Grade: __________________ Dates Sold: __________________ at $________ per gallon
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Grade: __________________ Dates Sold: __________________ at $________ per gallon
Grade: __________________ Dates Sold: __________________ at $________ per gallon

This business is located a distance of __________________________ from my business location.

I understand a copy of this complaint will be provided to the business this complaint is filed against, and the information received in
response to this complaint is proprietary, confidential, and will not be provided to me.

(Print or Type Name) (Signature)

DACS-03101 Rev. 07/07