## New Hampshire Banking Department Complaint Process

If you are unable to resolve a complaint directly with your financial institution you may request assistance from the New Hampshire Banking Department. Please complete this form and you may submit your complaint via:

## Email: legal@banking.nh.gov

Mail: New Hampshire Banking Department 53 Regional Drive Suite 200 Concord NH 03301

- Please ensure that you SIGN this form.
- All complaints MUST be in writing accompanied by supporting documents detailed below. The more complete the information submitted, the faster the situation can be addressed.
- Briefly summarize in chronological order the events leading up to your complaint. Describe in more detail the significant events that occurred.
- Your supporting documents should also include the following information and/or documents:
  - Your telephone numbers for home, work, and cell phone
  - Email address
  - The name and address of the institution involved
  - Account number, if applicable
  - Copies of pertinent documents (do not send us originals)
  - A statement describing the relief you are seeking
  - Dollar amounts involved
  - Date of transaction
  - Indicate whether you have already complained directly to the institution and, if so, whether by mail, by
    phone or in person and the nature of their response. In addition, please include the name of the person
    you spoke with and when you spoke with them
  - Has this matter been submitted to another agency or attorney? If yes, provide name and address
  - Is there a court action pending?
- Include legible photocopies of the most important or relevant documents (for example: promissory notes, account agreements, statements, and the like). Be sure to copy both sides of two-sided documents.
- Please do not enclose original documents. If originals are sent, we will make every effort to return them to you. However, we cannot be responsible for original documents enclosed with complaints.

## Institutions Not Under New Hampshire State Jurisdiction

To determine if your financial institution is supervised by the New Hampshire Banking Department, please visit our list of institutions on our website, or call us at (603) 271-3561.

If your institution is not on our list of regulated institutions available on our website, it may be under the jurisdiction of one of the following national financial institution regulators or other state regulators:

Office of the Comptroller of the Currency

Customer Assistance Group: 1-800-613-6743 Website: <u>www.helpwithmybank.gov</u>

National Credit Union Administration

Phone: 1-800-755-1030 Website: <u>www.ncua.gov/contact-us</u>

- Consumer Financial Protection Bureau
   Phone: 1-855-411-2372
   Website: www.consumerfinance.gov
- Federal Deposit Insurance Corporation

Phone: 1-877-275-3342 Website: <u>www.fdic.gov</u>

## New Hampshire Banking Department CONSUMER COMPLAINT FORM

**Instructions**: **Please print or type**. If you are unable to resolve a complaint directly with your financial institution, you may request assistance from the New Hampshire Banking Department. Please complete this form and mail it to the New Hampshire Banking Department, 53 Regional Drive, Suite 200, Concord NH 03301. You may also email your complaint to the agency at legal@banking.nh.gov. Please ensure that you **SIGN** this form.

SECTION I – CONSUMER INFORMATION		
NAME(Last, First, MI)	PREFERRED PRONOUN	DAYTIME TELEPHONE NUMBER
, ,		( )
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL ADDRESS		
SIGNATURE OF CONSUMER:		DATE:
SECTION II – INFORMATION FOR THE ENTITY TO WHOM THE COMPLAINT IS AGAINST		
NAME OF ENTITY		
ADDRESS		
CITY	STATE	ZIP CODE
SECTION III – NATURE OF COMPLAINT (Describe the nature of your complaint, the events in the order in which they		

**SECTION III – NATURE OF COMPLAINT** (Describe the nature of your complaint, the events in the order in which they occurred, including specific dates and names if possible, and the product or service which is the subject of the complaint. Attach copies, **not originals**, of all documents that relate to your complaint. In addition, indicate the resolution you are seeking. *If additional space is needed, please attach a separate sheet.* 

DESCRIPTION: