



MAVIS TIRE SUPPLY, LLC CLAIM FORM

Georgia Department of Law – Consumer Protection Division

Review this form before filling it out. Please type or print legibly in black or blue ink.

- This Claim Form is for consumers residing in Georgia who purchased services provided by Mavis in the State of Georgia, and:
 1. Have previously filed a complaint against Mavis Tire Supply, LLC with the company directly, the Georgia Department of Law-Consumer Protection Division, the Better Business Bureau (BBB), or any other Federal or State of Georgia regulatory agency; and
 2. Have *not* received a previous refund, restitution, or settlement from Mavis for this claim.
- Fill out the form *completely*. Failure to provide all of the information requested will not necessarily result in the denial of your claim; it could, however, delay consideration of your claim while we request additional information from you, or it could impact your ability to demonstrate your loss and/or recover restitution. Questions should be directed to Investigator Parker by email only to sparker@law.ga.gov.
- **Documents Requested.** Return this Claim form with copies (*no originals please*) of:
 1. Documents showing (a) that you were a Georgia resident when you purchased automotive services from Mavis Tire, LLC and (b) the automotive services were purchased from, and provided by, Mavis in the State of Georgia;
 2. Documents that reflect the services purchased from Mavis; the original payment(s) made to a Mavis Tire, LLC location; and the amount of those payment(s), such as a copy of a check, receipt of an invoice, etc.; and
 3. Any communication to or from Mavis Tire, LLC or its agents regarding complaints, inquiries, questions, or requests for refunds that you may have made. If this communication was primarily in-person or by telephone, please provide, wherever possible, records reflecting your communication with the business, as well as names of personnel with whom you spoke.

In some cases, the Georgia Department of Law, Consumer Protection Division may need to request additional documentation from you.

- Fill out both pages of this form. Keep a copy of both pages and any attachments for your records.
- Submit your completed Claim Form and any documentation by mail, overnight delivery, or fax. **You may not submit the Claim Form by email.**

Mail completed Claim Form and accompanying documents to:

Mavis Tire Restitution Program
Georgia Department of Law, Consumer Protection Division
2 Martin Luther King Jr. Drive, Suite 356
Atlanta, GA 30334-9077

Fax Claim Forms (including documentation) should be faxed to 404-651-9018

Your submission must be postmarked on or by the 13th of June, 2022.

- Please be aware that restitution will be drawn from funds held in a Restitution Account. If amount claimed by consumers exceed the amount in the Restitution Account, the funds will be distributed pro rata. This means that while you may be eligible for restitution, you may not receive the full amount requested.
- You will receive a response confirming or denying your eligibility from the Consumer Protection Division no later than August 12, 2022. While we will distribute funds from the Restitution Account to eligible consumers as quickly as possible, please note it is a time-consuming process to evaluate and verify each claim submitted. Your patience is appreciated.

CLAIM FORM

Consumer Name: _____
First *Middle Initial* *Last*

Consumer's Social Security Number (**Required**): _____ - _____ - _____

Mailing Address (**Required**): _____

City: _____ State _____ Zip _____

Phone: (____) _____ (Day) (____) _____ (Night) Email: _____

Have you ever filed a complaint about Mavis Tire, LLC with the Company, the Consumer Protection Division, the Better Business Bureau, or any other State or Federal regulatory agency? Yes No

If Yes: list the company or agency name, representative or agent with contact info., and file number (if known)

Do you have a copy of the original complaint submitted? Yes No

Service Purchased: _____

Date of Purchase: ____/____/____ Purchase Price: _____

Amount you claim you are owed as refund or reimbursement: \$ _____

Have you received a refund, account credit, replacement or other payment from Mavis Tire, LLC, your credit card company, or from any other source related to the product or service you have identified on this claim form? Yes No

Have you been or are you currently a party to any legal action against Mavis Tire, LLC? Yes No

If you answered "YES" to either question, please explain and identify any amounts you were refunded:

Please provide a brief explanation of your claim below and how you determined the monetary amount you are claiming. Your claim eligibility as well as your claim amount will be subject to verification and a representative of our office may need to contact you to ask for clarifying information.

Have you attached documents to substantiate your claim amount? Yes No

I declare, under penalty of perjury under the laws of the State of Georgia, that the information contained in this claim is true and accurate, and that any documents attached are true and accurate copies of the originals. I understand that my claim and the related documents will become a "public record" under state law, and thus can be subject to a public records disclosure request and/or be seen by other people.

_____/____/____
Signature Date City and State where signed

**The Claim Form must be returned postmarked no later than the 13th of June, 2022.
You may not submit this form by email.**