

# INSTRUCTIONS FOR COMPLETING THE USED CAR LEMON LAW REQUEST FOR ARBITRATION FORM

To participate in the New York State Used Car Lemon Law Arbitration Program, you must complete this form. Please be as accurate and complete as possible. You may send this form

electronically (to expedite the handling of your request) or by regular mail. Please send the completed form to:

# Email: NYAG.LemonLaw@ag.ny.gov

# (To expedite the handling of your request please email this form to us.)

You may also mail the form to:

Office of the New York State Attorney General 28 Liberty Street, 15<sup>th</sup> Floor New York, NY 10005 Attention: LEMON LAW ARBITRATION UNIT

The Attorney General's Office will review your form and advise you whether your claim is accepted in the arbitration program. If the form is accepted, you will be notified by the Attorney General's Office which will then forward your form to the **New York State Dispute Resolution Association** (**NYSDRA**), the Program Administrator. NYSDRA will then notify you to send it the required \$150 filing fee and any supporting documents you may have. Upon receipt of the filing fee, NYSDRA will begin processing your claim. If your form is rejected by the Attorney General's Office, it will be returned to you with a statement indicating the reason for its rejection.

# DO NOT SEND FILING FEE OR ANY SUPPORTING DOCUMENTS YOU MAY HAVE UNTIL YOU ARE REQUESTED TO BY NYSDRA.

Please remember to sign and date the form. Failure to complete any questions on the form may result in a rejection of the form.

## NOTICE:

THE ARBITRATOR'S DECISION UNDER THIS PROGRAM IS BINDING ON BOTH PARTIES, SUBJECT TO A LIMITED RIGHT OF APPEAL TO COURT BY EITHER PARTY. YOU MAY WISH TO CONSULT AN ATTORNEY BEFORE PARTICIPATING IN THIS PROGRAM. PLEASE READ "NEW YORK'S USED CAR LEMON LAW: A GUIDE FOR CONSUMERS" CAREFULLY BEFORE COMPLETING THIS FORM. Office Use Only:

Case No. Referred To NYSDRA \_\_\_\_\_\_ Filing Date \_\_\_\_\_\_

## NEW YORK STATE ATTORNEY GENERAL'S OFFICE LETITIA JAMES, ATTORNEY GENERAL

#### NEW YORK USED CAR LEMON LAW ARBITRATION PROGRAM REQUEST FOR ARBITRATION FORM

#### **CONSUMER INFORMATION**

1.	Name:					
	Address:					
	City:	State:	Zip:			
	Phone: Home ()	Work:	)			
	E-mail address:					
	[] I prefer to send/receive communications by e-r	nail rather than	by regular mail.			
DEAI	LER INFORMATION					
2.	Name:					
	Address:					
	City:State:		Zip:			
VEHI	CLE INFORMATION					
3.	Manufacturer:					
4.	Year: Make:	Model:				
5.	Year:       Make:       Model:         (ex. Chevrolet, Dodge)       (ex. Cavalier, Caravan)         Vehicle Identification Number (VIN):					
6.	Date of delivery: Mileage at delivery:					
7.	Did you purchase or lease your vehicle in New York?       Yes[] No[]         [] I purchased my vehicle.       [] I leased my vehicle.					
8.	Purchase Price: \$					
9.	Is your vehicle primarily used for personal, family or					

	household purposes?		Yes[] No[]		
10.	Do you still own (or lease) your vehicle?	Yes[] No[]			
WARI	RANTY INFORMATION				
11.	Which warranty applies to you (choose only one of the following)?				
or	<ul> <li>(a) 90 days or 4,000 miles from the date of delivery, whichever came first, if the vehicle was purchased or leased with between 18,000 and 36,000 miles?</li></ul>				
or	whichever came first, if the vehicle w leased with between 36,001 and 80,0	Yes[] No[]			
	(c) 30 days or 1,000 miles from the date whichever came first, if the vehicle v leased with between 80,001 and 100.	was purchased or	Yes[] No[]		
BANK	COR FINANCING INSTITUTION (if final	nced):			
12.	Name:				
	Address:				
	City:	State:	Zip:		
LEAS	ING COMPANY (if leased):				
13.	Name:				
	Address:				
	City:	State:	Zip:		
	Lease Acct #:				
VEHI	CLE'S PROBLEM(S)				
14.	List the covered problem parts (ex.: engine, o	alternator, generator)	for which you seek relief:		

15.	On what date and at what mileage d	report this problem(s)	
	to the dealer or the manufacturer?	Date:	Mileage:

 16.
 Does the problem(s) substantially impair the value of the vehicle to you?

 Yes [] No []

# **BASIS FOR RELIEF SOUGHT:** You must complete at least one of the following two questions (17 or 18).

#### 17. Unsuccessful Repair Attempts

- A. How many repair attempts for the <u>same</u> problem were made by the selling dealer, or authorized by the dealer, within the warranty period that applies to your vehicle (see question #11)
- B. Give the date, mileage, and work order number for each of the repair attempts by the dealer for the <u>same</u> problem.

Problem 1 (Specify)					
	Date	Mileage	Work Order #		
(1)					
(2)					
(3)					
Problem 2 (Specify)					
	Date	Mileage	Work Order #		
(1)					
(2)					
(3)					

#### 18. **Days in Shop for Repairs**

- A. How many days was the vehicle out of service due to repairs within the warranty period that applies to your vehicle (see question #11)? days.
- B. List the dates, mileage, and repair order numbers for those repairs:

From:	То:	Days out:	Mileage:	Work Order #
From:	То:	Days out:	Mileage:	Work Order #
From:	То:	Days out:	Mileage:	Work Order #

#### **HEARING LOCATION**

19. Please indicate where you want the arbitration hearing to be held:

[] Albany	[] Hempstead	[] Oneida
[] Amsterdam	[ ] Highland	[] Oneonta
[] Auburn	[ ] Hudson	[] Oswego
[] Batavia	[ ] Ilion	[] Penn Yan
[] Binghamton	[ ] Ithaca	[] Plattsburgh
[] Bronx	[ ] Jamaica	[] Poughkeepsie
[ ] Brooklyn	[] Jamestown	[] Rochester
[ ] Buffalo	[ ] Johnstown	[ ] Saratoga Springs
[ Canandaigua	[ ] Lake Placid	[] Schenectady
[] Carmel	[] Lower Manhattan	[] Smithtown
[] Catskill	[] Lowville	[] Speculator
[] Cobleskill	[] Lyons	[ ] Staten Island
[] Corning	[] Malone	[] Syracuse
[] Cortland	[ ] Monticello	[] Troy
[] Delhi	[ ] Montour Falls	[] Upper Manhattan
[ ] Elmira	[ ] New City	[] Utica
[ ] Fort Edward	[ ] Niagara Falls	[] Waterloo
[] Geneseo	[ ] Norwich	[] Watertown
[ ] Glens Falls	[] Ogdensburg	[] Yonkers
[] Goshen	[] Olean	

# TYPE OF HEARING AND RELIEF REQUESTED

20.	[ ] Or	al (In Person) [	] Documents only (if manuf	facturer agrees)
PREV	VIOUS A	ARBITRATION		
21.	A. Did you participate in any previous arbitration for the same problem(s) for which you now seek arbitration?			Yes[] No[]
	B.	If yes, what was the name of the	Program?	
	C.	Date of Decision:	(Attach a copy of th	ne decision)
	D.	Did you accept the decision of the	ne arbitrator?	Yes [ ] No [ ]
	E.	Did the dealer comply with the c	lecision?	Yes [ ] No [ ]
SIGNATURE:I		Date:		

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