



Title & Escrow

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Consumer Complaint Form

Date of Inquiry:

Contact Information:

Name:

Contact Address:

Home Phone Number:

Cell Phone Number:

Email Address:

Property Information:

Property Address:

City:

State:

Zip:

Transaction Information:

File Number:

Loan Number:

Transaction Type:

Purchase

Refinance

In the space below, briefly describe the nature of the inquiry. Please feel free to attach any documentation that you feel necessary to help us better understand your inquiry.