



GEORGIA DEPARTMENT OF LAW
Consumer Protection Unit

CHRISTOPHER M. CARR
ATTORNEY GENERAL

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July 20, 2017

AUG - 4 2017

[REDACTED]
Kentwood, Michigan 4 [REDACTED]

Re: Reference File Number [REDACTED]
Business Name: Volkswagen of Macon / Betten Imports

Dear Ms. [REDACTED]

The Consumer Protection Unit of the Georgia Department of Law has received your complaint regarding Volkswagen of Macon / Betten Imports. Upon review of this matter, it appears to be the type of allegation handled by the National Highway Traffic Safety Administration (NHTSA).

We have forwarded a copy of your complaint to the NHTSA for review. Please direct all future correspondence to that agency at the following address:

Dr. Mark R. Rosekind, Administrator
National Highway Traffic Safety Administration
1200 New Jersey Avenue SE, West Bldg.
Washington, DC 20590
Phone: 888-327-4236
TTY: 800-424-9153
Website: <http://www.nhtsa.gov>

Thank you for bringing this situation to our attention.

Sincerely,

L. Torres
Clerk

cc: National Highway Traffic Safety Administration (w/attachment)

RZ

AM
9-21-17
IN

Michigan Office Of Attorney General Consumer Complaint Form

Web Complaint Number: 2016-cp11021214849-A

Submitted: 11/2/2016 12:14:53 PM

Consumer Information

Your Last Name: [REDACTED] **First Name:** [REDACTED] **MI:** M
Your Street Address: [REDACTED] **City:** Kentwood
Your State: MI **Zip Code:** [REDACTED]
Your County: Kent
Your Home Phone: [REDACTED] **Your Work Phone:** [REDACTED] **Ext.:**
Fax Number: [REDACTED] **E-mail Address:** [REDACTED]
Are you a veteran or active-duty service member?

Primary Company Or Person Your Complaint Is About

Company or Person? Company
Complainee Last Name: [REDACTED] **Complainee First Name:** [REDACTED]
Company Name: Betten Imports **City:** Grand Rapids
Street Address: 5901 28Th St Se **Zip Code:** 49546
State: MI **Phone:** 6163012100
County: Kent **E-mail Address:** [REDACTED]
Fax Number: [REDACTED] **Product Offered:** Service
Web Site Address: Www.bettenimports.com
Primary Jurisdiction: Repairing Motor Vehicles

Secondary Company Or Person Your Complaint Is About

Company or Person? Company
Complainee Last Name: [REDACTED] **Complainee First Name:** [REDACTED]
Company Name: Volkswagen Of Macon **City:** Macon
Street Address: 2110 Eisenhower Pkwy **Zip Code:** 31206
State: GA **Phone:** 8773127201
County: Outside Michigan **E-mail Address:** [REDACTED]
Fax Number: [REDACTED]
Web Site Address: [REDACTED]

Motor Vehicle Warranty Complaint Information

Vehicle Make, Model, and Year: [REDACTED]
Vehicle VIN No.: [REDACTED]

Complaint Information

Incident Date\Time: 10/26/2016 12:00:00 PM
Incident Location: [REDACTED]
Approximate Monetary Value: 213.91
Did you sign a contract? False
Where did you sign this contract? [REDACTED]
Is a court action pending? False
Do you have an attorney representing you on this matter? False
Are you willing to testify in court regarding this complaint? True
Did you complain directly to the business? True

What was the response from the business?
If no complaint was given to the business directly, why?
Was this complaint filed with any other agencies? True
Do you think were targeted for unfair treatment due to your status as a False
veteran or active-duty service member?

Complaint Detail/Inquiry Information

There was a recall on my daughter's 2012 Volkswagen Passat. The head lamp connector housing were melting. I am caught between two dealerships. Volkswagen of Macon Georgia stated that they fixed the recall on May 5th 2015. All of a sudden, one of the connectors burned out in her. I took her car to Betten Imports on Oct. 26 2016. They proceeded to tell me that the the headlamp connector housings were not updated and that her vehicle still had the old version. Neither one of the dealerships or Volkswagen of America are willing to reimburse me.

[False] Check if you want to send documentation. After you submit this form you will be provided with a postal mail address, and facsimile number, to which you may send documents.

[False] Check if this referral is just to give us information and you do not need us to respond to you directly.

[False] Check if you want to sign up for the Consumer Protection Listserv.

[False] Check if you want to sign up for the AG Press Release Listserv.

[False] Check if you want to sign up for the Attorney General Opinions Listserv.

(*) I certify that the information on this form is true and accurate to the best of my knowledge.

(*) I consent to releasing to the Michigan Attorney General any information or document relative to the investigation of this complaint. By checking this box, I also certify that I have had the opportunity to review the Michigan Attorney General Privacy Policy before submitting this complaint.

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07/20/2017

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National Highway Traffic Safety Administration
1200 New Jersey Avenue SE
West Building
Washington, DC 20590-0001

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