

**BBB AUTO LINE
Customer Claim Form**Case number: [REDACTED]
Contact Date: 7/8/2025
Start Date:

Please make any necessary corrections to the information below, print or verify your VIN number and lienholder/leasing company information at the bottom of this page, and complete the missing information in Section 4 on the next page (attach additional sheets as needed).

SECTION 1: CUSTOMER INFORMATION

Titled owner: [REDACTED]		
Mailing address: [REDACTED]		
City: STERLING HEIGHTS	State:	Zip code: [REDACTED]
Day phone:	Evening phone: [REDACTED]	Cell phone:
Fax: [REDACTED]	E-mail address: [REDACTED]	

SECTION 2: VEHICLE INFORMATION

Make: Cadillac	Model: Escalade	Year: 2023	Current mileage: 30,070
Name(s) that appears on the vehicle title: [REDACTED]			
Selling dealer/city/state: Empire Auto Collection			Michigan
Primary Servicing dealer/city/state: Serra Chevrolet			Sterling Heights Michigan
Acquired as ☐ new ☒ used ☐ demo ☐ leased		Is your vehicle Certified Pre-Owned? ☐ yes ☒ no	
Purchase/lease date: 6/16/2024		Mileage at purchase/lease: 18,000	
First repair attempt date: 6/1/2024		First repair attempt mileage: 27,000	
How often is the vehicle used for business purposes (percentage): 0 %		Number of vehicles owned or leased by the business:	Is the vehicle in your possession? ☒ yes ☐ no
Has the vehicle been in an accident/had body damage? ☐ yes ☒ no			Date of accident:
Description of damage:			

SECTION 3: DESIRED OUTCOME (Describe what you want done to resolve your concern)

Replace with a new Escalade

Please complete the missing information in the box below and on page 2.

VEHICLE IDENTIFICATION NUMBER

SECTION 4: VEHICLE PROBLEMS (List primary problem first)

Problem	Servicing dealer(s)	# of repair attempts	List the date, mileage, and days out of service for each repair attempt	Does the problem exist now?
Example:				
A/C won't cool properly	Any Dealer, Inc.	2	4/23/06 3,500 miles 5 days 6/10/07 12,700 miles 1 day	yes
Car keeps breaking down, engine related	Serra Chevrolet	2	6/1/2024 27,000 Miles 14 Days	True

Total days out of service for all problems: 14

Signature of Titled Owner(s) _____ Date _____

Printed Name of Titled Owner(s) XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX _____

I am submitting this dispute for resolution in the BBB AUTO LINE program, and I agree to arbitrate the dispute under the BBB AUTO LINE Arbitration Rules.

Please mail or fax this completed form with copies of all available repair orders, your vehicle registration, your sales agreement or lease agreement, and any other relevant documents (e.g., written correspondence with the manufacturer, etc.) to:

**BBB AUTO LINE
1676 International Drive, Suite 550
McLean VA, 22102
Fax: 703-247-9700**