Print Form and Instructions

Dell Claim Instructions

Office of the Massachusetts Attorney General
Consumer Protection Division

Public Inquiry & Assistance Center Hotline: (617) 727-8400

Section 1 Dell Preferred Account.

Please provide the Dell Preferred Account (DPA) number if you used a DPA account to finance your purchase that is the subject of your claim. If you did not use a DPA (or have an account), you do not need to fill this out.

Section 2 Dell product or service.

Your claim must relate to a Dell product or service (such as extended warranty or service contract) that you purchased. For example, if you purchased a Dell laptop from Dell and you had to pay a local repair company to fix it because Dell failed to repair it while it was covered by warranty, you can file a claim.

Section 3 Date of purchase.

Please provide the date of purchase of the item that is the subject of your claim. Your purchase must have occurred on or after April 1, 2005 for your claim to be eligible.

Section 4 Purchase price.

Please provide the price of your original purchase. This amount will most likely be larger than the amount you will be able to claim after you have filled out Sections 5 and 6 (*see form and instructions below*).

Section 5 Basis of your claim.

In this section, you may check one or more of the items listed that apply to your particular circumstances. The items listed address practices that the states have determined would violate our consumer protection laws. Dell has agreed to correct their business practices so that they will be in compliance with the law in the various states.

Each item is self-explanatory. You may find that none of the items relate to your circumstances. For example, you may have experienced a service-related problem like long hold times or being on the phone for extended periods of time with service personnel, but Dell ultimately corrected your problem. You may believe that you are entitled to some monetary recovery for your time; however, that would not be an eligible claim under this claims process. Another possible problem may be that your Dell product stopped working after the warranty period was over and you may believe that you are entitled to some compensation because you believe that the product should have been more durable; again, this would not be an eligible claim in this process.

If your issue is not covered by any of the items listed in Section 5, you might want to file a consumer complaint with our office, if you have not previously done so. You can file a complaint online at www.mass.gov/ago/consumercomplaint. You can also download a complaint form and send it to our office; or you can call our office at (617) 727-8400 to request to speak with a member of the Consumer Hotline Staff.

Section 6 Monetary amounts.

Each item in this list relates to one or more of the items in Section 5 that you have checked. Again, these are fairly self-explanatory. The amount(s) that you provide in this section will make up your claim. Provide your actual amounts if you have them. If you no longer have documentation that would help you verify your claimed amount(s), you may submit your best estimate. Any amount(s) you provide in this section must be money you paid out-of-pocket, either at the time of your original purchase, or subsequently, such as for unexpected fees, interest, or extended service coverage. **You must submit an amount in one or more of the blanks in this section in order for your claim to be considered for restitution.** We will review your claim form and the amounts you have provided and may contact you for further clarification.

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Section 7 Refunds, credits and other recovery.

In this section, we ask that you check one of the two boxes. For example, if Dell replaced a faulty product for which you are claiming restitution, you would check the "Yes" box. Likewise, you may have gotten some other refund or credit from Dell to address your particular concern.

Section 8 Other legal action.

Please check the appropriate box. For example, if you are suing Dell in a "small claims court" proceeding, you would check "Yes." Also, you would check "Yes" if you have **agreed** to be or to have been a "class member" in a class action lawsuit. You should check "No" otherwise.

Section 9 Explanation of your "Yes" response to either Section 7 or 8.

Please provide a brief explanation of the circumstances and the monetary value of any refund or other recovery you have received in the past.

Section 10 Total amount of your claim.

Add any amount(s) you have provided in Section 6, subtract any amounts you have provided in Section 9. This is your claim amount.

Section 11 Brief explanation.

If necessary, please provide a brief explanation of your claim amount. You do not have to provide an explanation if you believe that the information you have provided in the preceding sections is adequate. If we have questions regarding your claim, we will contact you.

Section 12 Personal information and declaration.

In order to get your restitution payment to you, we will need the information we are asking you to provide in this section. You must sign the form. By signing, you are declaring that the information you are providing is true and accurate. Even if you have estimated some amounts, so long as those estimates are true and accurate to the best of your knowledge, you may sign the declaration.

Electronic signatures are acceptable for completed forms sent via email. To add your electronic signature, type your name in the "Signed By" field, and select the "Declaration" box.

Please note: When completing this electronic form, all text must fit in to the allotted fields. Text that is not visible on your screen will not be included in your form submission.

Completed Claim Forms may be submitted by email, fax, or mail to:

Dell Restitution Program
Consumer Protection Division
Office of the Attorney General
One Ashburton Place
Boston, MA 02108
Fax: (617) 727-5765
Email: DellClaims@state.ma.us
www.mass.gov/ago/dell_claims

Print Form and Instructions

Dell Claim Form

Office of the Massachusetts Attorney General
Consumer Protection Division

Please review this form BEFORE filling it out. Please fill out the form **completely**. **Return this form postmarked by April 13, 2009.** If you are filing a claim for more than one product or service, you will need to fill out a separate claim form for each product or service. Feel free to make copies of this form or, if necessary, contact our office for additional forms. Please return this claim form with any additional pages, if necessary, and copies (no originals, please) of documents you feel help explain or substantiate your claim. **Be sure to include a dollar amount in the "Amount you claim you are owed" even if that amount is your best estimate.** Please do your best to provide complete information. If you cannot provide all of the information we are requesting, it will not necessarily eliminate your claim. However, we may need to obtain additional information from you, which could delay consideration of your claim. NOTE: IT IS IMPORTANT TO FILL OUT BOTH PAGES OF THIS FORM AND TO MAKE A COPY OF BOTH PAGES FOR YOUR RECORDS.

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Claim Information

1. "Dell Preferred Account" number (if known/applicable): _____

2. Dell product or service you are filing a claim for: _____

3. Date of purchase: _____ 4. Purchase price: _____

5. Check all those items that apply:

- ☐ I was promised "Same as Cash" promotional financing (interest rates waived for a period of time, e.g., 90 days, 1 year, etc.) when I signed up for my Dell Preferred Account ("DPA") and/or purchased the item advertised with the promotional financing offer, but when I was billed for the item, I discovered that I did not, in fact, get the promotional financing.
- ☐ I got a "Same as Cash" promotional financing incentive, but Dell charged me interest I never agreed to.
- ☐ The interest rate on my DPA turned out to be higher than I was told at the time I signed up for the account.
- ☐ I applied for, but never received, a rebate that Dell promised when I purchased my product.
- ☐ I incurred unexpected fees on my DPA (for example, late charges) that I did not owe.
- ☐ Dell (or their agent) failed to satisfactorily repair or replace the identified product covered by my extended warranty.
- ☐ Dell failed or refused to provide next business day "on site" service promised in my extended or other warranty coverage.
- ☐ Dell refused to attempt repair on an item that failed during the warranty period.
- ☐ Dell failed or refused to repair an item that was no longer on warranty but which I informed Dell about before the warranty expired.
- ☐ I had to pay for someone other than Dell (or their agent) to repair the item.
- ☐ Dell failed to satisfactorily repair or replace the identified product that failed during the warranty period.

6. Please provide the following amounts that apply to the items you checked on the left.

Extra amount in interest I paid: _____

Dollar value of rebate promised: _____

Fees I paid: _____

Amount paid for extended warranty: _____

Amount paid to Dell for on-site coverage: _____

For any **service-related** items checked on the left (and not shown above), the following is the amount I **paid out of pocket to Dell or to another service provider**:

_____

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7 Have you received a refund, account credit, replacement or other payment from Dell, your credit card company, or from any other source related to the product or service you have identified on this claim form?

Yes ☐ No ☐

8 Have you been or are you currently a party to any legal action against Dell?

Yes ☐ No ☐

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

10 Total amount you claim you are still owed: _____

(total all dollar amounts you have provided on first page of form and subtract any refunds, credits or other payment entered above)

11 Please provide a brief explanation of your claim below and how you determined the monetary amount you are claiming. Please be aware that your claimed amount may be subject to verification and a representative of our office may need to contact you to ask for clarifying information.

12 **Claimant Information**

Name: _____

Last *First* *Middle Initial*

Address: _____

City: _____ State: _____ Zip: _____

Phone (*day*): _____ Phone (*evening*): _____ Email: _____

Have you filed a complaint about Dell with the Attorney General's Office before?

Yes ☐ No ☐ If yes, list the file number: _____

I declare, under penalty of perjury under the laws of the State of Massachusetts, 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" and under state law can be subject to a public records disclosure request and thus be seen by other people.

Signed by: _____ Date: _____ City and state where signed: _____

For email forms: Fill in your name on the "Signed by" line above, and check the box next to "Declaration" below.

By filling in my name and checking this box, I certify that the information I have provided is true and correct to the best of my knowledge, and that I adopt this as my online signature.

Declaration ☐

Submit by Email

Please return completed Claim Form to: Dell Restitution Program, Office of the Attorney General, Consumer Protection Division, One Ashburton Place, Boston, MA 02108 • Fax: (617) 727-5765 • Email: DellClaims@state.ma.us