

Nod Notice of Dispute

Nod (“Nod”) is committed to member satisfaction and would like to resolve all customer complaints in a fair and efficient manner. If you are not satisfied with the resolution provided by the Nod customer experience department, you may notify Nod of your dispute by submitting this form to the Nod Dispute Resolution Department.

Please complete this entire form and send by certified U.S. mail to:

Attn: Dispute Resolution Department
Nod
110 Pacific Ave Mall, Box #117
San Francisco, CA 94111

Retain a copy of the completed Notice of Dispute for your records.

You will receive a response within 30 days of receipt of this form. Nod will use best efforts to resolve your complaint, but if you are not satisfied with our proposed resolution you may begin arbitration proceedings by following the instructions within our terms of service.

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Name of Nod account holder:
Email address with which your Nod account is registered:
Your primary contact phone number:
Your primary contact email address:
Your official mailing address:

Below please identify and detail the nature of your claim, the basis for that claim and relief sought. (If you need more room please continue on a separate page and attach with this Notice).

If you are an authorized representative of the account holder please provide the following information.

Your name:
Relationship to the account holder:
Contact phone number:
Contact email address:
Contact mailing address:

Date

Signature

Please attach any supporting documents that you may have.