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Missouri Public Service Commission

POST OFFICE BOX 360
JEFFERSON CITY MISSOURI 65102
573-751-3234
573-751-1847 (Fax Number)
<http://www.psc.mo.gov>

EXHIBIT ●
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Director, Utility Operations
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Chief Staff Counsel

November 03, 2009

5 STAR HOMES & DEV. CO, INC.
69 SCHAPER RD
FORISTELL, MO 63348

RE: GORDON, TIMOTHY J & DONNA M

COPY

Dear Sir or Madam:

This is to inform you that the Department of Manufactured Housing and Modular Units has received a consumer complaint involving a manufactured home purchased from your dealership. The consumer's complaint form is enclosed.

Pursuant to Section 700.100.3(6) RSMo 1994, manufactured home dealers are responsible to arrange for the proper initial setup of any manufactured home or modular unit purchased from their dealership, unless the dealer receives a written waiver of that service from the purchaser or his authorized agent.

Please investigate this complaint and refer to any items on the complaint form that may indicate setup problems. You are required to correct any noted setup deficiencies you are responsible for and mail or fax the enclosed work order to this office within 20 days from receipt of this notification. The work order must be signed by the homeowner, and must list any setup deficiencies that have been corrected.

A Manufactured Housing Inspector will contact this homeowner after 20 days to see if their complaint has been resolved. If necessary, the Inspector will schedule a complete inspection of the home, including setup.

Please note that failure to correct setup deficiencies could result in a formal complaint being brought before the Public Service Commission for enforcement measures.

Thank you for your prompt attention to this matter. Should you have any questions, do not hesitate to contact the Manufactured Housing & Modular Unit Program at 800-819-3180.

Sincerely,

Ron Fleus, Director
Manufactured Housing & Modular Units Program

Enclosure

Staff Exhibit No. 4
Date 11/9/10 Reporter JNB
File No. MC-2010-0311



Missouri Public Service Commission Manufactured Housing & Modular Unit Program Inspection Request/Consumer Complaint Form

Please print legibly or type.

09-000158

CONSUMER INFORMATION (REQUIRED)		OFFICE USE ONLY	
Name	TIMOTHY J. & DONNA M. GORDON	File Name	Gordon Timothy & Donna
Address	2842 FOXWOOD DR.	Inspector	freeman
City/State/Zip	MARYLAND HEIGHTS, MISSOURI 63043	Received by:	PBB
County	ST. LOUIS	Date of Inquiry:	Date of Receipt: 11/3/09
Work Phone	N/A (RETIRED)	HOME INFORMATION (REQUIRED)	
Home Phone	314-298-9629	☒ New or ☐ Used	☐ Single or ☐ Multi-Section
Other Phone	314-737-8312	Set Up ☒ Basement ☐ Foundation ☐ Piers	
MANUFACTURER INFORMATION (REQUIRED)		Serial Number (REQUIRED)	N/A (NOT MADE YET)
Name	CONTEMPRI HOMES INDUSTRIES, INC.	HUD Label Number	
Address	1000 WEST WATER STREET	Model	NEW HAVEN II (RANCH)
City/State/Zip	PINCKNEYVILLE, ILL. 62274	Date of Manufacture:	N/A
DEALER INFORMATION (REQUIRED)		Date of Delivery:	N/A
Name	5STAR HOME & DEVELOPMENT CO., INC.	Has the home been moved from original location?	☐ Yes ☒ No
Address	69 SCHAPER RD	Are you the first owner of the home?	☒ Yes ☐ No
City/State/Zip	FORISTELL, MISSOURI 63348	INSTALLER INFORMATION (IF KNOWN)	
REASON FOR REQUEST (REQUIRED)		Name:	
List each concern separately. Do not write concerns in paragraph form.		Decal #:	
1. DEALER HAS \$58,000 OF OUR MONEY (MINUS \$12,500 HE SENT TO FACTORY) 2. FACTORY SAYS \$12,500 IS NOT ENOUGH TO START CONSTRUCTION (SO, HOME CONST. HAS NOT STARTED) 3. DEALER VERBALLY PROMISED OUR HOME 100% COMPLETE BY SEPTEMBER 2009 4. DEALER PROMISED A \$5,995.00 UTILITY VEHICLE INCENTIVE TO SIGN CONTRACT (NEVER DELIVERED) 5. DEALER WON'T ANSWER OFFICE OR HIS CELL PHONE 6. DEALER WON'T RETURN CALLS WHEN WE LEAVE MESSAGES 7. WE CAN'T SELL OUR CURRENT HOME 8. WE CAN'T PROCEED ANY FURTHER WITH OUR NEW HOME SITE (IE, NO WELL, SEPTIC, DRIVEWAYS ETC.) 9. OUR WALK-OUT BASEMENT (COMPLETED EARLY AUGUST) IS BEING WEATHERED UNNECESSARILY 10. WE ARE MAKING INTEREST PAYMENTS ON OUR CONSTRUCTION LOAN, WITH NO CONSTRUCTION 11. OUR CONSTRUCTION LOAN WITH HANNOBAL NATL BANK (9 MONTH ORIENTATION) EXPIRES FEB. 2010 12. 13. 14. 15.			
Attach additional sheets if necessary.		MANUFACTURED HOUSING DEPARTMENT	
Signature of Consumer (REQUIRED)		Date	
Timothy J. Gordon		30 October, 2009	
This form must be completed in full and submitted with a copy of the Bill of Sale or Purchase Agreement. (REQUIRED) RETURN TO: Manufactured Housing & Modular Unit Program P.O. Box 360, Jefferson City, MO 65102 PHONE: 800-819-3180 FAX: 673-522-2509			

RECEIVED
NOV 03 2009