

Michigan Office Of Attorney General Consumer Complaint Form

Web Complaint Number: 2013-cp12022200606-A

Submitted: 12/2/2013 10:00:53 PM

Consumer Information

Your Last Name: [REDACTED] First Name: [REDACTED] MI: C
Your Street Address: [REDACTED] City: Winter Haven
Your State: FL Zip Code: 33884
Your County: [REDACTED]
Your Home Phone: [REDACTED] Your Work Phone: [REDACTED] Ext.:
Fax Number: [REDACTED] E-mail Address: [REDACTED]

Primary Company Or Person Your Complaint Is About

Company or Person? Company
Complaine Last Name: [REDACTED] Complaine First Name: [REDACTED]
Company Name: Best Drug Rehab Tranquility Detox
Street Address: 327 Capital Av Ne City: Battle Creek
State: MI Zip Code: 49017
County: Phone: 2697047200
Fax Number: E-mail Address: [REDACTED]
Web Site Address: www.bestdrugrehabilitation.com Product Offered: Substance Abuse Rehabilitation
Primary Jurisdiction: None

Secondary Company Or Person Your Complaint Is About

Company or Person? Company
Complaine Last Name: [REDACTED] Complaine First Name: [REDACTED]
Company Name: [REDACTED]
Street Address: [REDACTED] City: [REDACTED]
State: MI Zip Code: [REDACTED]
County: Phone: [REDACTED]
Fax Number: E-mail Address: [REDACTED]
Web Site Address: [REDACTED]

Motor Vehicle Warranty Complaint Information

Vehicle Make, Model, and Year:
Vehicle VIN No.:

Complaint Information

Incident Date\Time: 9/18/2013 9:00:00 AM
Incident Location: Tranquility Detox, Battle Creek, MI
Approximate Monetary Value: 20000
Did you sign a contract? True
Where did you sign this contract? Battle Creek MI
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? Nothing
If no complaint was given to the business directly, why?
Was this complaint filed with any other agencies? True

Complaint Detail/Inquiry Information

Company misrepresented themselves on their website. They have a picture of a hotel room on the website but it is a far cry from a hotel room. The facility consists of bunk beds and old furniture with up to 8 bunk beds in each room. They represent that the company is not Scientology but it is. They have huge stacks of Ron L. Hubbard books with workbooks and teach patients how to stare for up to two hours. I have never been in a rehab so I did not know what to expect. They take most of your belongings from you and store them in a storage unit outside the facility. Most of your belongings, cell phone, electronics and beauty supplies are taken away to be returned at the end of your stay. You are not allowed to speak to your [REDACTED] for the entire time of your stay. When clients are sold the rehab center they are told that they have 48 hours to get there so that they will not have time to research the rehab center and change their mind. I was told that they had a scholarship but I had to be there within 48 hours to qualify. I was also offered free airfare but I had to be there within 48 hours. Then when the clients get there and there are vulnerable getting off of substances, there are given all of this paperwork to sign. When they are coming off of [REDACTED] and have no representatives to assist i.e. [REDACTED] you are signing for things that you are not sure of. Since I have gotten home I have sent several notarized written requests for my documents but I have not been provided with these, so I am not sure what I have signed. They changed my mailing address to Battle Creek MI and my insurance claims checks were sent there. When I did not receive the check and called with Blue Cross Blue Shield because the check had been cashed, I was informed that I had made them Power of Attorney. I would have not done that in my right mind but I was not in my right mind when I arrived there due to getting off of [REDACTED]. I asked them to email me the Power of Attorney that I had signed but have not been provided with this. I have asked numerous times for my records and not been provided these. Until I am provided this documentation I am not positive the documents signed.

[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 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 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.
