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Dear Merchant:

The Cuyahoga Falls Law Department's procedure for handling bad check cases is designed to resolve bad check issues. Other jurisdictions that have implemented similar programs have reported a high resolution success rate.

Ultimately, a merchant may have to proceed through a civil action to recoup his monies lost. **A criminal prosecution against a person who passes a bad check deals only with punishment (i.e., imprisonment and/or a fine).** The purpose of the bad check program is to assist the merchant and the check writer in obtaining a resolution of any misunderstandings concerning the transaction at issue.

This letter will provide important information that you, the merchant, will be obligated to supply to this office in order to effectuate the program.

First, when accepting a check, be careful to make proper identification of the check writer. Making a positive visual comparison of the check writer to a photo identification must be accomplished. A Social Security Number or Driver's License number of the check writer must be obtained. **It is imperative that the person accepting the check be able to identify the check writer in the event the case is prosecuted.**

Second, when the check is dishonored by the bank, send a **certified letter** to the check writer. This letter should include:

1. Your name, address, and phone number
2. Check number
3. Face value of check
4. The bank on which it was drawn and the reason for dishonor
5. Any service charge

The letter should state that the check writer has 10 days from receipt to respond or further legal action will be taken. Mail the letter in an envelope marked, "address service requested" to ensure delivery to a new address in case the individual has moved.

Please seek the advice of a private attorney for any additional information that should be included in the letter pursuant to the Fair Debt Collection and Reporting Act of the U.S. Code.

Once you have sent the certified letter and received a **signed receipt card, you will complete FORM A (attached) and return it to our office with a COPY of the check and a COPY of the SIGNED certified receipt card.** (If you anticipate the need to use this program often, please make as many copies of Form A as you may need for future use.) Unfortunately, until a signed receipt card has been returned to you, there is no indication that the check writer is aware of the problem. **Therefore, until you have a signed receipt card, we will be unable to schedule a hearing on your behalf.**

If you are unable to resolve the check dispute or the writer fails to respond to your letter within 10 days, return Form A to our office with copies as stated above and we will set up a check hearing. The Law Department will notify the check writer as to the date and time he should appear for the hearing. You, the merchant, must also appear at this hearing.

When you arrive for your hearing(s), be sure to bring the original check. The check writer has the right to the check in the event payment is made.

The hearing should last 10-15 minutes and the majority of the time will be spent attempting to work out any misunderstandings between the parties. If an agreement is reached as to the payment of the check, and if the writer does not fully comply with the agreement, the matter is a breach of contract which is a **civil matter**. This office cannot prosecute.

If the check writer does not appear for the initial hearing, we may schedule a second hearing. If the check writer does not appear for the second hearing, this office will review the case for possible prosecution. (Note: The final decision to prosecute is dependent upon various factors – one being the ability of the person who has accepted the check to properly identify the defendant as the check writer.)

It is important that all of the procedures set forth be followed for the successful resolution of a claim.

If you have any questions, please feel free to contact this office.

LAW DEPARTMENT

BAD CHECK REPORT FORM A

1. _____ Last Name First Middle Date of Check _____ Last Name First Middle (additional name)				Date Filed _____ Case # _____ Judge _____	
2. Check # _____ Account # _____ Amount \$ _____ Name of bank _____ Date check was presented to bank _____				Disposition: _____ _____ _____ Approved By: _____	
3. _____ Drivers License # State Ohio I.D./Soc.Services _____ Social Security Date of Birth Race Sex _____ Height Weight Expiration Phone #				Evaluation Dates: _____ _____ _____ _____	
4. CHECK FOR: Rent / Bad Debt / Payments: Services Rendered _____ Merchandise _____ Cash _____		8. Current Address or Last Known _____ _____ _____ _____ _____ Phone: _____			
5. Notice Certified Letter Sent _____ Receipt Received _____ Was Receipt Signed by Def. _____ Face to Face Admission _____		9. Name and address of person who accepted check and made visual comparison with I.D. _____ _____ _____ _____ _____ Phone: _____			
6. Check was for: (i.e., Insufficient Funds, Closed Acct.) _____		10. Can person in #9 identify the defendant as the checkwriter. YES _____ NO _____			
7. N.P.P. HEARING First Date: _____ Notice Returned: _____ 2 ND Date _____		11. COMMENTS/Vehicle Information: _____ _____ _____ See Back, YES ----- NO ----- List additional checks and amounts from SAME account on back of form.			
Name of merchant _____ Store Rep: _____ Address: _____ Phone: _____					