

## **Sussex County Association of REALTORS® Ombudsman Request**

| Name of Complainant:                                  |
|-------------------------------------------------------|
| Firm (if any):                                        |
| Address:                                              |
| Preferred Phone for Contact:                          |
| Email:                                                |
| Best time to contact:                                 |
| Role in Transaction:(buyer, seller, agent, broker)    |
| Name of Respondent:                                   |
| Firm:                                                 |
| Address:                                              |
| Phone:                                                |
| Email:                                                |
| Role in Transaction:(buyer, seller, agent, broker)    |
| What issue would you like the Ombudsman to resolve? * |
|                                                       |
|                                                       |
|                                                       |

Return to the Sussex County Association of REALTORS®, 23407 Park Avenue, Georgetown, DE 19947 or email to: <a href="mailto:info@scaor.com">info@scaor.com</a>

<sup>\*</sup> All information on this form is confidential. The Sussex County Association of REALTORSs® will destroy this form and any other documents and materials pertaining to this matter at the conclusion of the Ombudsman services.