

Siskiyou Association of Realtors®

Grievance and Complaint Form

Information About YOU

Name (enter full name)		License Number	
Current Broker Office			
Contact Phone		Email Address	
Address			

Information About Person/Company You Are COMPLAINING AGAINST

Name of Broker Firm <i>(enter full name)</i>		License Number	
Business Address of Broker Firm		Business Phone	
Agent/Broker Name <i>(enter full name)</i>		License Number	
Agent/Broker Name of Second Licensee		License Number	
Date of Transaction		MLS ID Number Involved	
Address of Property Involved			
Place(s) Where Transaction(s) Occurred. <i>(list location of conversation, etc.)</i>			

Contact – Have you contacted the Agent and their Broker about your complaint?

YES – Agent
 NO - Agent
 YES – Broker (if not the same as the Agent)
 NO - Broker (if not the same as the Agent)

Date of Contact		Person Contacted	
How Contacted <i>(phone, email, in person)</i>		Location of Contact <i>(if in-person)</i>	
Result of Contact			
Date of Contact		Person Contacted	
How Contacted <i>(phone, email, in person)</i>		Location of Contact <i>(if in-person)</i>	
Result of Contact			
Date of Contact		Person Contacted	
How Contacted <i>(phone, email, in person)</i>		Location of Contact <i>(if in-person)</i>	
Result of Contact			

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Contact – Continued

Date of Contact		Person Contacted	
How Contacted (phone, email, in person)		Location of Contact <i>(if in-person)</i>	
Result of Contact			
Date of Contact		Person Contacted	
How Contacted (phone, email, in person)		Location of Contact <i>(if in-person)</i>	
Result of Contact			

Witness – Where there any witnesses to the described transaction(s)?

NO **YES** – Please provide their information below and complete in your statement below what they witnessed in detail

Witness Full Name #1		Contact Phone	
Your Relationship to the Witness		Email Address	
Address			
Witness Full Name #1		Contact Phone	
Your Relationship to the Witness		Email Address	
Address			

Documents – Indicate which of the following documents are attached, incorporated and made part of this complaint.

ATTACHED	NOT AVAILABLE	TYPE OF DOCUMENT
<input type="checkbox"/>	<input type="checkbox"/>	Listing Agreement
<input type="checkbox"/>	<input type="checkbox"/>	Deposit Receipt <i>(Offer)</i>
<input type="checkbox"/>	<input type="checkbox"/>	Cash Receipt(s)
<input type="checkbox"/>	<input type="checkbox"/>	Cancelled Check(s)
<input type="checkbox"/>	<input type="checkbox"/>	Escrow Instructions, Amendments, and Closing Statements <i>(if any)</i>
<input type="checkbox"/>	<input type="checkbox"/>	Copies of all Documents Which Relate to Your Complaint <i>(which are not listed above)</i>

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Statement – Provide a Brief Statement, Give the Full Essentials of Your Complaint Below

- Include full names of individuals, including all witnesses present during the transaction(s), Be factual, try to answer the questions WHO, WHAT, WHEN, WHERE. Attach extra sheets if necessary.
- Refer to State of California Bureau of Real Estate Form 519A for guidelines relating to statement preparation.

Certification – I provide under penalty of perjury that the foregoing statement and attachments thereto are true and correct.

Signature of Complainant

Date