



REAL ESTATE COMPLAINT FORM

The Ohio Division of Real Estate & Professional Licensing (“Division”) serves as Ohio’s licensor and regulator of real estate brokers and real estate salespersons. In its role as regulator, the Division accepts complaints filed against licensed real estate brokers, real estate salespersons, foreign (outside of Ohio) real estate dealers, foreign real estate salespersons, and unlicensed persons acting as real estate brokers and salespersons. The Division does not regulate condo associations, homebuilders, contractors, mortgage companies, escrow agents, or title companies.

The Division does not have authority to interpret, enforce, or cancel contracts, award damages to a complainant, order the return of monies, or resolve commission disputes between licensees. Any action seeking to recover monetary damages should be initiated in a court of law. Do not delay any civil action you might be considering in the matter. Additionally, the Division cannot provide legal advice or act as attorney for any party.

Complaints may be mailed to the Division using the standard form below. Complaints may be submitted via email if the complaint form is completed, signed, and attached; generic email complaints will not be accepted. **Copies (not originals) of all documents concerning the complaint should be included when filing a complaint via mail or email. For example, please attach purchase contracts/written agreements, lease agreement, etc.**

COMPLAINT FORM INSTRUCTIONS

1. Please fill in the form **completely** - type or print with blue or black ink. Sign the bottom of the form.
2. Furnish copies, not originals, of all transaction documents (i.e. agency disclosures, contracts, HUD Statement).
3. If you file a complaint, you should be willing to appear as a witness and testify under oath about the allegations.
4. Both you and the licensee(s) have an opportunity to participate in mediation to resolve differences. Mediation is confidential, completely voluntary, and is a shorter process compared to a formal investigation.
5. All complaints must be delivered to: **Ohio Division of Real Estate and Professional Licensing, Enforcement Section, 6606 Tussing Rd, PO Box 4008, Reynoldsburg, OH 43068 or emailed to License.Complaints@com.ohio.gov.**

COMPLAINANT INFORMATION (Identifies you as the Complainant)			
FIRST NAME	M.I.	LAST NAME	
HOME ADDRESS			HOME PHONE
CITY			STATE ZIP CODE
BUSINESS ADDRESS			BUSINESS PHONE
CITY			STATE ZIP CODE
EMAIL ADDRESS			MOBILE PHONE

NOTE: This complaint will become public record. A copy will be given to the party against whom the complaint is filed. A person who files a complaint should be willing to appear as a witness, be sworn to testify, and be cross-examined concerning the allegations made in the complaint.

PERSON(S) COMPLAINED AGAINST

LICENSEE OR UNLICENSED PERSON #1

FIRST NAME	LAST NAME		
COMPANY NAME			
COMPANY ADDRESS			PHONE
CITY	STATE	ZIP CODE	
EMAIL ADDRESS			

LICENSEE OR UNLICENSED PERSON #2

FIRST NAME	LAST NAME		
COMPANY NAME			
COMPANY ADDRESS			PHONE
CITY	STATE	ZIP CODE	
EMAIL ADDRESS			

SUBJECT PROPERTY INFORMATION

ADDRESS	DATE(S) OF TRANSACTION(S)		
CITY	STATE	ZIP CODE	

- Are you interested in participating in a mediation meeting? YES NO
- Do you have any relevant written documents pertaining to the transaction?
(listing agreement, agency disclosure forms, etc.) **IMPORTANT:** Please enclose copies – **DO NOT SEND ORIGINALS** YES NO
- Were you a party to the transaction? YES NO
If no, please explain your relationship:
- Have you consulted or hired an attorney regarding your complaint? HIRED CONSULTED NO
If yes, please complete the information below:

ATTORNEY INFORMATION:

FIRST NAME	M.I.	LAST NAME	
LAW FIRM NAME			
BUSINESS ADDRESS			BUSINESS PHONE
CITY	STATE	ZIP CODE	

This Complaint involves the same related matter which are the subject of a :
 Civil lawsuit Criminal case Board of Realtor's case

Please attach any and all copies of paperwork regarding the above checked items.

Are there witnesses to this transaction other than you?

YES NO

If yes, please furnish the information below.

WITNESS INFORMATION:

FIRST NAME	M.I.	LAST NAME	
ADDRESS			PHONE
CITY			STATE ZIP CODE
FIRST NAME	M.I.	LAST NAME	
ADDRESS			PHONE
CITY			STATE ZIP CODE
FIRST NAME	M.I.	LAST NAME	
ADDRESS			PHONE
CITY			STATE ZIP CODE

Have you previously notified the person against whom the complaint is made?

YES NO

If yes, how were they notified?

WRITTEN ORAL

What was their response?:

NATURE OF THE COMPLAINT (check all that apply)

The individual I am complaining about:

- Won't release a deposit / earnest money.
- Has been convicted of a crime.
- Threatened me with a lawsuit.
- Demands a commission they didn't earn.
- Promised something not in the contract.
- My agent wasn't loyal to me or my interests.
- Did not disclose problems with the property.
- Won't pay my commission.
- Did not provide a Consumer Guide to Agency.
- Did not provide an Agency Disclosure form.
- Didn't follow my instructions.
- Didn't give me copies of paperwork I signed or requested.
- Has lied to me about this transaction.
- Discriminated against me or members of my family.
- Didn't inform me they owned the property I bought.
- Didn't deliver my offer / present me an offer. (Timely)
- Changed a form or document without my permission.
- Tried to sell my property without my consent.
- Didn't put in writing when my listing ended.
- Acted as an agent, but has no license.
- Owes money out of a final court judgment.
- Did not tell me they had a relationship with the other party.

This list does not represent every possible violation. Please give the details of your complaint on the next page.

COMPLAINT DESCRIPTION

Briefly give the full details of your complaint. PLEASE TYPE or PRINT LEGIBLY

Attach additional sheets if necessary.

COMPLAINANT AFFIRMATION

I certify that to the best of my knowledge, all information supplied by me is true. I recognize that the Division will serve only as facilitator to try to resolve this matter and cannot represent me in any legal proceedings.

SIGNATURE(S) OF COMPLAINANT(S)

DATE