

VAR Use Only:
Received: _____
Ombudsman Assigned: _____
Request #: _____



VIRGINIA ASSOCIATION OF REALTORS®
REQUEST FOR OMBUDSMAN

1. PARTIES

1a. COMPLAINANT'S NAME _____ ROLE IN THE TRANSACTION; _____
(Buyer, Seller, Landlord, Tenant, REALTOR)

1b. YOUR CONTACT INFORMATION: _____
(Phone) (Email)

1c. Best time to call: _____

1d. SUBJECT PROPERTY (If any): _____

1e. REALTOR® #1 NAME: _____ REALTOR® FIRM: _____

1f. REALTOR'S® local association (if known): _____

1g. REALTOR® #1 CONTACT INFORMATION _____
(Phone) (Email)

1h. REALTOR® ROLE IN THE TRANSACTION: _____
(Listing Agent, Buyer's Agent, Referring Agent)

1i. REALTOR® #2 NAME _____ REALTOR® FIRM: _____

1j. REALTOR'S® local association (if known): _____

1k. REALTOR® #2 CONTACT INFORMATION _____
(Phone) (Email)

1l. REALTOR® ROLE IN THE TRANSACTION: _____
(Listing Agent, Buyer's Agent, Referring Agent)

2. BACKGROUND

2a. Has a formal complaint been filed? Yes _____ No _____ Where? _____

2b. Please briefly state the concerns you would like to address with a REALTOR® Association Ombudsman:

