



Kent County Association of REALTORS® Ombudsman Request

Name of Complainant: _____

Company (if any): _____

Address: _____

Preferred Phone for Contact: _____

Email: _____

Best time to contact: _____

Role in Transaction: _____

(buyer, seller, agent, broker)

Name of Respondent: _____

Company (if any): _____

Address: _____

Preferred Phone for Contact: _____

Email: _____

Best time to contact: _____

Role in Transaction: _____

(buyer, seller, agent, broker)

What issue would you like the Ombudsman to resolve?

Return to the Kent County Association of REALTORS®

519 S Red Haven Lane, Suite B, Dover, DE 19901 or you can email to: Crystal@kcar.org

All information on this form is confidential. The Kent County Association of REALTORS® will destroy this form and any other documents and materials pertaining to this matter at the conclusion of the Ombudsman services.