



HRRRA.com
Hampton Roads
REALTORS® Association

Ombudsman Request Form

Date: _____

Name of Complainant: _____

Firm (if any): _____

Address: _____

Preferred Phone for contact: _____ Best time to contact you: _____

Role in Transaction: _____ *(buyer, seller, agent, broker)*

Subject property (if any) _____

Name of Respondent: _____

Firm: _____

Address: _____

Phone: _____

Role in Transaction: _____ *(listing agent, selling agent, broker)*

What issue would you like the Ombudsman to resolve? * *(Attach additional form in necessary)*

Return to: Hampton Roads REALTORS® Association, 638 Independence Parkway, Suite 100, Chesapeake, VA 23320, or Fax to (757) 473-7297, or email to: Cathy Crossfield at CCrossfield@HRRRA.com.

** All information on this form is confidential. The Hampton Roads REALTORS® Association will destroy this form and any other documents and materials pertaining to this matter at the conclusion of the ombudsman services.*

HAMPTON ROADS REALTORS® ASSOCIATION
638 Independence Parkway, Suite 100, Chesapeake, VA 23320
Phone: 757-473-9700 Fax: 757-473-9897 HRRRA.com