



**PACIFIC WEST ASSOCIATION OF REALTORS®**

**OMBUDSMAN REQUEST**

Name of Complainant: \_\_\_\_\_

Firm (If any): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Role in Transactions (buyer, seller, agent, broker): \_\_\_\_\_

Name of Respondent: \_\_\_\_\_

Firm (If any): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Role in Transactions (buyer, seller, agent, broker): \_\_\_\_\_

What issue would you like the Ombudsman to resolve?

\*Attach additional form if necessary or go to page 2 to continue your case

Would you like the Ombudsman to contact your Realtor?      Yes                      No

**Return to:** Pacific West Association of REALTORS®

1601 E. Orangewood Avenue, Anaheim, CA 92805, or fax to (714) 245-5599

Attn: Professional Standards Dept. Or e-mail to [prostandards@pwr.net](mailto:prostandards@pwr.net)

**Additional Information**