



This document is an online form available on the boards website for the consumer to complete and e mail to the board.
Staff will forward this form along with ombudsman worksheet to the ombudsman

Ombudsman Request Form

Complainant: _____

Name of Firm (if applicable): _____

Cell Number: _____

Email Address: _____

You are the: ___ Buyer ___ Seller ___ Agent ___ Broker

Respondent: _____

Name of Firm (if applicable): _____

Cell Number: _____

Email Address: _____

Role in the Transaction: ___ Buyer ___ Seller ___ Agent ___ Broker

Issue regarding request for Ombudsman Service:

Please complete and return form to: Ramona Leshner at rllesher@nccbor.com

Information on this form is confidential

An Ombudsman will be in contact with you.