

New Jersey Department of Banking and Insurance
Consumer Inquiry and Response Center (CIRC)
P. O. Box 471 - Trenton, New Jersey 08625-0471
Phone: (609) 292-7272 Fax: (609) 454-8468

If you previously contacted the Department and were given a CIRC tracking number, please enter it below.

REAL ESTATE ASSISTANCE FORM CIRC Tracking # _____

Please check one:

- I do not want to file a complaint at this time, but merely to inquire about the actions of the licensee as set forth below.
- I do want to file a complaint and have this matter investigated for possible regulatory violations.

Please print or type:

Name: _____ Phone Number: _____

Home Address: _____ Business Phone: _____

_____ Cell Phone: _____

City: _____ State: _____ Zip Code: _____ E-mail: _____

Complaint or inquiry involving:

Name: _____ Phone Number: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Nature of complaint or inquiry:

Date of Transaction: _____

What action do you want? _____

Give a brief explanation of your complaint or inquiry: *(Please enclose copies of any documents to support your claim)*

Use next page if more room is needed.

PLEASE NOTE: As an initial step, you should attempt to address this matter in writing with the licensee/brokerage firm involved and allow a reasonable period of time for them to respond. Please mail/fax this signed form to the above address along with copies of any pertinent documents.

By signing this form, I understand that a copy of this form and enclosures may be sent to the party cited within the request and authorize the release to the N.J. Department of Banking and Insurance of any records pertinent to this request.

Date _____ Signature _____