



COMPLAINT FORM INSTRUCTIONS

- **PLEASE READ** – Before completing the attached complaint form, please take the time to read these instructions. They will help you understand our function and better help us to understand and act on your complaint.
- **WHAT WE CAN DO** – The Bureau of Real Estate Appraisers (BREA) will investigate complaints to determine if there has been unlawful or unprofessional conduct by an applicant for licensure or a licensed appraiser. Since a variety of factors impact the order in which the complaints are reviewed and investigated, we are unable to estimate how long this process may take. However, all complaints will be acknowledged in writing and you will be notified when BREA has closed the case associated with your complaint and appropriate action, if any, has been taken.

We will make every effort to keep your identity confidential. However, proper prosecution may require your testimony in administrative or other legal proceedings that require you to appear as a witness subject to cross-examination.

- **WHAT WE CANNOT DO** – We cannot give legal advice or act as your attorney. We cannot act as a court of law or order the refund of monies, award damages or enforce contracts. You may wish to consult an attorney or seek financial relief through the judicial system if you are seeking any of these outcomes.
- **HOW CAN YOU HELP US** – Summarize your complaint in a chronological manner using these guidelines:
 - ✓ Tell us *what* happened. Start from the beginning and describe the events as they occurred. Be specific as to what was said and who said it.
 - ✓ Tell us *who* was present during these conversations, acts or events.
 - ✓ Tell us *when* and *where* these conversations, acts or events took place.

Documentary evidence is especially important! To expedite the handling of your complaint, please provide legible photocopies of all documents relating to your complaint. Identify the documentation in item #21 of the complaint form. Maintain your original copies in a safe and secure location.

ITEM #23, Certification Statement, must be signed and dated to validate your complaint.

Please return your completed complaint to:

**Bureau of Real Estate Appraisers
Enforcement Unit
1102 Q Street, Suite 4100
Sacramento, California 95811**

(916) 552-9020 Assistance
(916) 552-9008 Facsimile



BREA USE ONLY

ENFORCEMENT UNIT
COMPLAINT OF UNETHICAL OR UNLAWFUL CONDUCT
Read the Complaint Form instructions before completing this form.
Type or print clearly in ink.

INFORMATION ABOUT YOU (Complainant)

1. Name			
Last	First	M.I.	Reference No. (if applicable)
2. Business Telephone Number		3. Home Telephone Number	4. E-mail Address
5. Business Address (<i>Street, City, State, Zip Code; Include Apartment or Suite Number if applicable</i>) - Public Record			
6. Home Address (<i>Street, City, State, Zip Code; Include Apartment or Suite Number if applicable</i>)			
7. Relationship to Complaint (<i>e.g. Homeowner, Real Estate Agent, AMC, Regulator, Lender, Review Appraiser, etc.</i>)			
8. Reason for Appraisal (<i>e.g. Refinance, Purchase, Divorce, Probate, etc., or other action which generated this complaint</i>)			

INFORMATION ABOUT THE APPRAISER

9. Name of the Appraiser		
Last	First	M.I.
10. BREA License or Certificate Number		
11. Address (<i>Street, City, State, Zip Code; Include Apartment or Suite Number if applicable</i>)		
12. Business Telephone Number		
13. Have you contacted the Appraiser regarding your complaint?		
<input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please complete the following:		
Date(s) of Contact	Person(s) Contacted	
Results:		

INFORMATION ABOUT THE PROPERTY INVOLVED

14. Address of Property Involved
15. Date and County Transaction Occurred

16. Have you filed this complaint with another agency including the Law Enforcement?	
<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please complete the following:</i>	
Name of Agency and Person Contacted :	
Address and Phone Number of Agency :	
Results of that Complaint (if any) :	
17. Have you retained an attorney in this matter? (If applicable)	
<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please include the following:</i>	
Name of Attorney	Business Telephone Number
Address of Attorney (<i>Street, City, State, Zip Code; Include Apartment or Suite Number if applicable</i>)	
18. May we contact your attorney with reference to this matter?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
19. Is this complaint related to any action filed or pending in any court?	
<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please complete the following and give details in Number 22. (Attach additional sheets if necessary)</i>	
Name of Court	
Address of Court (<i>Street, City, State, Zip Code</i>)	
Type of Action	Case Number
20. Were there any witnesses who have knowledge of the events described in this complaint?	
<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please complete the following and give details in Number 22. (Attach additional sheets if necessary)</i>	
Full Name of Witness #1	
Address (<i>Street, City, State, Zip Code; Include Apartment or Suite Number if applicable</i>)	
Your Relationship to the Witness	Daytime Telephone Number
Full Name of Witness #2	
Address (<i>Street, City, State, Zip Code; Include Apartment or Suite Number if applicable</i>)	
Your Relationship to the Witness	Daytime Telephone Number
Full Name of Witness #3	
Address (<i>Street, City, State, Zip Code; Include Apartment or Suite Number if applicable</i>)	
Your Relationship to the Witness	Daytime Telephone Number

21. Indicate the documentation you are submitting in support of this complaint. (*Do not send originals*)

Document	Pages	Attachments (if any)
<input type="checkbox"/> Complete Appraisal Report(s)	_____	_____
<input type="checkbox"/> E-mails/correspondence pertinent to your complaint	_____	_____
<input type="checkbox"/> Legible copies of any other evidence to support your allegations (e.g. additional appraisals, review appraisals, additional sales, photos, etc.)	_____	_____
<input type="checkbox"/> Other (<i>explain</i>):		
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

22. In the form of a brief statement, please give the full details of your complaint. Be factual.
Try to answer the questions: *Who, What, When, Why* and *How*. (*Attach additional sheets if necessary*)

23. Certification Statement. (Must be signed and dated to validate complaint)

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FACTS STATED HEREIN AND THE ATTACHMENTS HERETO ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Signed this _____ day of _____ in the county of _____ (county)
_____ (state).

Complainant Signature _____

Complainant Name (please print) _____