



Ombudsman Request Form

COMPLAINANT INFORMATION

NAME

PHONE

ROLE (buyer, seller, broker, etc.)

RESPONDENT INFORMATION

NAME

PHONE

ROLE (buyer, seller, broker, etc.)

Please describe the conflict using the space below, using additional pages if necessary. Also, include any documentation you feel supports the conflict.

Email the completed form and supporting documentation to prostandards@nomar.org. An Ombudsman will be assigned to you and will attempt to contact you within two business days. The Ombudsman will initiate all contact.