



**Illinois Department of Financial and Professional Regulation
Division of Real Estate
Real Estate Brokerage Complaint**

What we can do for you –

The Division of Real Estate (DRE) will investigate complaints to determine if there has been unlawful or unprofessional conduct by a real estate broker, real estate company, or leasing agent. The investigation process can be lengthy depending upon a variety of factors inside and outside of our control. All complaints, that are not anonymously submitted, are acknowledged in writing and you will be notified when DRE has closed the issue.

We will make every effort to keep your identity confidential during the investigation. However, the Prosecutions Unit may require your testimony in an administrative proceeding. You may be required to appear as a witness and be subject to cross-examination.

What we cannot do for you –

- We cannot provide legal advice or act as your attorney.
- We cannot order the refund of fees, award damages, or enforce or cancel contracts.
- We cannot mediate commission disputes.

Please type or print legibly and clearly. You must retain a copy of this form for your records, no copies will be provided.

YOUR INFORMATION (COMPLAINANT)

Name		Daytime Phone Number	
Company (if any)			
Address		Email Address	
City		State	Zip
<input type="checkbox"/>	I wish to remain anonymous and understand that an anonymous complaint must be supported by evidence, or it will be closed.		

CONTACT PERSON on behalf of the COMPLAINANT (indicate "Same" if the Contact is the Complainant)

Contact's Name		Daytime Phone Number	
Contact's Address		Contact's Email Address	
City		State	Zip

INFORMATION ABOUT THE REAL ESTATE BROKER OR LEASING AGENT

Name of the Real Estate Broker, Leasing Agent, or applicable Profession		License Number if Known	
Address, Email Address, Phone Number		Date or Dates of Occurrence	

ADDRESS(ES) OF THE PROPERTY OR PROPERTIES THAT IS/ARE THE SUBJECT OF YOUR COMPLAINT

Have you Contacted the Real Estate Broker, Leasing Agent, or applicable Profession about your Complaint?	
<input type="checkbox"/> NO	<input type="checkbox"/> YES
<i>If YES, please complete the following:</i>	
Date(s) of Contact	Person(s) Contacted

