



OFFICE OF
THE DISTRICT ATTORNEY
COUNTY OF MARIN

LORI E. FRUGOLI
DISTRICT ATTORNEY

Guidelines for Completing the Real Estate Fraud Complaint Form

Before filling out the attached complaint form, please take the time to read these guidelines. They will help you to understand our function, and we will be better able to understand and act on your complaint.

What We Can Do:

The Marin County District Attorney's Office Real Estate Fraud Unit investigates real estate fraud related cases occurring in Marin County. The types of cases which will be considered for investigation are frauds that result from real estate transactions and/or schemes such as: submission of a forged loan application; fraudulent transfers of title to real property; recordation of fraudulent real estate documents; and foreclosure and loan modification fraud.

When we receive a real estate fraud complaint, we review all the information and the supporting documentation that is included. If the complaint does not meet the above-described criteria to open a case, we will do our best to refer you to an agency that will handle the appropriate type of matter involved. Many real estate disputes are not appropriate for criminal action, but are altogether proper for civil legal action. You may wish to consult a private attorney to explore possible civil remedies that might be available.

This office is not legally permitted to represent individuals in civil matters, take action in order to obtain money owed a consumer, help cancel any debt due on a contract that was signed, resolve or mediate individual consumer complaints, or obtain other personal relief.

If you believe you have been a victim of real estate fraud, or you have suffered a loss involving your home or purchase of a home due to fraud, please complete this complaint form.

How You Can Help Us:

- A. Complete the enclosed Complaint Form as thoroughly as possible. Incomplete information may result in a decision not to investigate your complaint.
- B. Type or print clearly and legibly, using ink.
- C. Write or type a summary of your complaint and attach the summary to the complaint form. Please include the following information:
 1. Explain **what** happened in chronological detail. *Be thorough and specific.*
 2. Explain **who** you think is responsible for the fraud.

3. Explain **where** (address, city, state) all acts and transactions took place.
 4. Explain **when** and **how** you first became aware that you may have been defrauded. Please indicate exact dates (if possible) in which you had contact with any individuals or companies you suspect were involved in the fraud. If someone else made you aware of the fraud, please include that person's name, address, and telephone number.
 5. Explain **how** you know or believe your transaction was fraudulent.
 6. Indicate what your actual financial loss is, if known. Do not include lost interest, unrealized profits or missed opportunities.
- D. Documentary evidence is especially important. Please provide **copies** of any and all documentation related to the transaction(s), including contracts, agreements, certificates, notes, deeds, correspondence, checks, bank records, loan documents, escrow documents, etc. Please **retain the originals for your records**.
- E. Upon completion of the Complaint Form, mail the form with your complaint summary and all supporting documentation to the following address:

**Marin County District Attorney
Real Estate Fraud Unit
Attention: Complaint Form Reception
3501 Civic Center Drive, Room 145
San Rafael, CA 94903-4189**

All complaints must be signed by the complaining party (not by their attorney) before an investigation will be opened. The complaint will be reviewed within 60 days. Please do not call asking for an update on your complaint. You will be notified when your complaint has been reviewed and what, if any, action will be taken by our office.

Thank you for your cooperation.



MARIN COUNTY DISTRICT ATTORNEY Real Estate Fraud Complaint Form

DID YOU RECEIVE A REFERRAL NUMBER FROM OUR OFFICE? YES NO

IF YES, WHAT IS YOUR REFERRAL NUMBER? _____

PLEASE PRINT LEGIBLY.

I. COMPLAINING PARTY (*Person Filing Complaint*)

NAME (First, Middle Initial, Last)		DATE OF BIRTH	DRIVER'S LICENSE OR I.D. NUMBER	
STREET OR PO BOX NO.		APT. NO.	OCCUPATION	
CITY		STATE	ZIP CODE	
TELEPHONE NUMBER #1 ()		EMAIL ADDRESS		

II. SUSPECT / BUSINESS (*Party Whom Complaint Is Against*)

SUSPECT / BUSINESS NAME				
STREET OR PO BOX NO.		APT. NO.	TELEPHONE NUMBER	
CITY		STATE	ZIP CODE	
<i>IF INDIVIDUAL:</i>				
DOB OR AGE (APPROX.)	MALE / FEMALE	RACE	HEIGHT	WEIGHT
STREET OR PO BOX NO.		APT. NO.	TELEPHONE NUMBER	
CITY		STATE	ZIP CODE	

IF MORE THAN ONE SUSPECT / BUSINESS, PLEASE INCLUDE THAT INFORMATION ON A SEPARATE PIECE OF PAPER

III. TRANSACTION INFORMATION

PLEASE FILL IN ALL RELEVANT INFORMATION.

DATE OF TRANSACTION / OCCURRENCE		NATURE OF TRANSACTION / OCCURRENCE (Mortgage, Foreclosure, Loan Modification, etc.)		
DID YOU SUFFER MONETARY LOSS? <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE OF LOSS	METHOD OF PAYMENT (Cash, check, credit card)	AMOUNT OF LOSS	
WAS ANY PROPERTY INVOLVED? <input type="checkbox"/> YES <input type="checkbox"/> NO	FAIR MARKET VALUE	IS IT YOUR PROPERTY? <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER		
PROPERTY ADDRESS				

IF MORE THAN ONE PROPERTY IS INVOLVED, PLEASE INCLUDE THAT INFORMATION ON A SEPARATE PIECE OF PAPER

DID YOU SIGN AN AGREEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO	WAS A COPY PROVIDED TO YOU? <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE AND LOCATION AGREEMENT WAS SIGNED
---	---	--

IV. NARRATIVE

On a separate sheet of paper, please explain the facts upon which you are basing your complaint. Include any representations or statements that were told to you that you believe were false. Please be as detailed and thorough as possible.

V. SUBSEQUENT ACTION

DID YOU CONTACT SUSPECT ABOUT YOUR COMPLAINT?

 YES NO

DATE OF ATTEMPT

RESULT

IF YOU SUCCESSFULLY MADE CONTACT WITH SOMEONE, WHAT WAS THE RESULT?

HAVE YOU CONTACTED ANY OTHER LAW ENFORCEMENT AGENCIES ABOUT YOUR COMPLAINT?

 YES NO

DATE OF CONTACT

NAME OF OTHER LAW ENFORCEMENT AGENCIES

CASE NO. GIVEN TO YOU (IF ANY)

NAME OF OFFICER ON CASE (IF ANY)

IF LAW ENFORCEMENT PROVIDED YOU WITH A REPORT, PLEASE INCLUDE A COPY WITH YOUR COMPLAINT.

HAVE YOU CONTACTED A PRIVATE ATTORNEY?

 YES NO

HAS A CIVIL LAWSUIT BEEN FILED?

 YES NO

IF YES, DATE LAWSUIT FILED

NAME OF ATTORNEY CONTACTED

PHONE NUMBER

IF YOU HAVE FILED A CIVIL LAWSUIT, PLEASE INCLUDE A COPY OF THE COURT DOCUMENTS, INCLUDING THE COMPLAINT.

VI. WITNESSES

PLEASE LIST ANY WITNESSES THAT MAY BE RELEVANT TO YOUR COMPLAINT. USE A SEPARATE SHEET OF PAPER IF NECESSARY.

WITNESS #1 NAME

HOW RELATED TO THE COMPLAINT

STREET OR PO BOX NO.

APT. NO.

TELEPHONE NUMBER

CITY

STATE

ZIP CODE

WITNESS # 2 NAME

HOW RELATED TO THE COMPLAINT

STREET OR PO BOX NO.

APT. NO.

TELEPHONE NUMBER

CITY

STATE

ZIP CODE

VII. DOCUMENTATION

PLEASE CHECK WHAT DOCUMENTATION IS RELEVANT TO YOUR CASE AND INDICATE IF YOU HAVE PROVIDED A COPY WITH YOUR COMPLAINT. FAILURE TO PROVIDE COPIES OF DOCUMENTS THAT YOU HAVE THE ABILITY TO OBTAIN MAY RESULT IN YOUR COMPLAINT BEING RETURNED TO YOU.

- | | |
|--|--|
| <input type="checkbox"/> Advertising materials | <input type="checkbox"/> COPY PROVIDED |
| <input type="checkbox"/> Promissory Note, Contract or Agreement | <input type="checkbox"/> COPY PROVIDED |
| <input type="checkbox"/> Grant Deed, Deed of Trust, or other title documents | <input type="checkbox"/> COPY PROVIDED |
| <input type="checkbox"/> Will or Trust documents | <input type="checkbox"/> COPY PROVIDED |
| <input type="checkbox"/> Escrow, mortgage, and/ or loan documents | <input type="checkbox"/> COPY PROVIDED |
| <input type="checkbox"/> Bank Statements | <input type="checkbox"/> COPY PROVIDED |
| <input type="checkbox"/> Cancelled checks (front and back) | <input type="checkbox"/> COPY PROVIDED |
| <input type="checkbox"/> Cash receipt(s) | <input type="checkbox"/> COPY PROVIDED |
| <input type="checkbox"/> Correspondence between you and suspect (letters, faxes, emails, etc.) | <input type="checkbox"/> COPY PROVIDED |
| <input type="checkbox"/> Other law enforcement reports | <input type="checkbox"/> COPY PROVIDED |
| <input type="checkbox"/> Civil lawsuit documents | <input type="checkbox"/> COPY PROVIDED |
| <input type="checkbox"/> Other documentation (please indicate name of documents) | <input type="checkbox"/> COPY PROVIDED |

VIII. DECLARATION

NOTE: Section 148.5(a) of the California Penal Code states: "Every person who reports to any peace officer listed in section 830.1 or 830.2, district attorney, or deputy district attorney that a felony or misdemeanor has been committed, knowing the report to be false, is guilty of a misdemeanor."

I declare that the foregoing statements are true and correct to the best of my knowledge and belief.

Date: _____

Signature: _____