

FORM M  
[See rule 36(1)]

COMPLAINT TO REAL ESTATE REGULATORY AUTHORITY  
COMPLAINT UNDER SECTION 31 OF THE ACT

For use of Regulatory Authority(s) office:

Date of filing:.....

Date of receipt by post:.....

Complaint No.:.....

Signature of authorised officer:.....

IN THE REGULATORY AUTHORITIES OFFICE (Name of place)

*Between*

.....Complainant(s)

*And*

.....Respondent(s)

***Details of claim***

1. *Particulars of the complainant(s):—*

(i) Name of the complainant:

(ii) Address of the existing office / residence of the complainant:

(iii) Address for service of all notices:

2. *Particulars of the respondents:—*

(i) Name(s) of respondent:

(ii) Office address of the respondent:

(iii) Address for service of all notices:

3. *Jurisdiction of the regulatory authority:*

The complainant declares that the subject matter of the claim falls within the jurisdiction of the regulatory authority.

4. *Facts of the case:*

(give a concise statement of facts and grounds for complaint)

5. *Relief(s) sought:*

In view of the facts mentioned in paragraph 4 above, the complainant prays for the following relief(s).....

[Specify below the relief(s) claimed explaining the grounds of relief(s) and the legal provisions (if any) relied upon]

6. *Interim order, if prayed for:*

Pending final decision on the complaint the complainant seeks issue of the following interim order:

(Give here the nature of the interim order prayed for with reasons)

7. *Complainant not pending with any other court, etc.:*

The complainant further declares that the matter regarding which this complaint has been made is not pending before any court of law or any other authority or any other tribunal(s).

8. *Particulars of bank draft in respect of the fee in terms of sub-rule (1) of rule 35 and regulations issued by the authority:*

(i) Amount :

(ii) Name of the bank and branch on which drawn :

(iii) Demand Draft Number :

(iv) Demand Draft Date :

9. *List of enclosures:*

(Specify the details of enclosures with the complaint)

### VERIFICATION

I.....(name in full block letters) son/daughter of .....  
the complainant do hereby verify that the contents of paragraphs (1 to 9) are true to my personal knowledge and belief and that I have not suppressed any material fact(s).

Place:

Date:

*Signature of the complainant(s).*