

# County of Santa Clara

Office of the District Attorney

County Government Center, West Wing  
70 West Hedding Street  
San Jose, California 95110  
(408) 299-7400  
www.santaclara-da.org



**Jeffrey F. Rosen**  
**District Attorney**

## **Subject: Instructions regarding Real Estate Fraud Complaint Form**

Please fill out the Real Estate Fraud Unit Complaint Form completely. Feel free to add any separate statement of facts or chronology if you need additional space. Also, please provide **COPIES** of all relevant documents relating to the real estate transaction and/or fraud about which you are reporting (i.e., deeds, loan documents, escrow documents, contracts, etc.). Please do not provide original documents at this time but maintain them in a safe place.

Please return the completed complaint form and copies of your relevant documents to:

**Email it to:** [Realestatefraud@dao.sccgov.org](mailto:Realestatefraud@dao.sccgov.org)  
**Mail/Deliver to:** **Office of the District Attorney**  
**Attn: Real Estate Fraud Unit**  
**70 West Hedding Street**  
**San Jose, CA 95110**

If you need counseling regarding a pending foreclosure, or help obtaining a loan modification, please call **Project Sentinel** at **(408) 470-3730**. Project Sentinel is a nonprofit HUD approved foreclosure counselor which does not charge any fees for its services. If you believe you were the victim of a predatory loan or housing discrimination, you may want to contact **The Fair Housing Law Project** at **(408) 280-2452**.

You are also advised to consider consulting with a private civil attorney to determine what civil remedies are available to you. Filing a complaint with this office will not toll or stop any civil Statute of Limitations from running. If you do not know of an attorney who can represent you, you may want to call the Santa Clara County Bar Association's Legal Referral Service at (408) 971-6822.

If the complaint falls within the jurisdiction of another local, state, or federal agency, we may refer your complaint to that agency or provide other agencies with a copy of your complaint. The rights of victims of crime are set forth on the Santa Clara County District Attorney's website located at: <https://countyda.sccgov.org/victim-services/victim-services-unit>

**IMPORTANT: The District Attorney's Office will not attempt to delay or stop a foreclosure sale on behalf of a homeowner, or a pending eviction. If you believe your home is being wrongfully foreclosed upon, or that you are being wrongfully evicted, you should consider consulting with a licensed civil attorney.**



# OFFICE OF THE DISTRICT ATTORNEY

## Real Estate Fraud Complaint Form

**Santa Clara County**  
**Office of the District Attorney**  
**Real Estate Fraud Unit**  
 70 West Hedding Street, West Wing  
 San Jose, CA 95110  
 Phone: 408-792-2879  
 Fax: 408-279-8742  
 Email: [realestatefraud@dao.sccgov.org](mailto:realestatefraud@dao.sccgov.org)

For Office Use Only:  RF- _____  REFU # _____
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\* Indicates a required field

Your Information			
First Name*	Last Name*	Midle Name	Date of Birth*
Mailing Address*			
City*	State*	Zip Code*	CA Driver's License No.*
Daytime Phone Number*	Alternate Phone Number		Cell Phone Number
Preferred Language to Communicate*		E-mail Address*	
Information about the Business or Person(s) this Complaint is about			
Suspect or Business Name*		Other Suspect's Names	
Primary Suspect's Address			
City	State	Zip Code	Suspect's Website:
Suspect's Phone Number:		Suspect's Fax Number:	
If known, Suspect's Date of Birth:		Suspect's E-mail Address:	
Complaint Information			
Date(s) incident happened		Where did the incident happen? (City)*	
Summarize what happened that you believe is illegal (example, "My signature was forged on a deed.")			
When did you discover the crime?*	What is the dollar amount of your loss? \$	If your loss was paid to the suspect, how did you pay? <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Debit card <input type="checkbox"/> Other: _____	

Have you made a complaint to another agency? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, name of Agency and Report Number:
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Do you have a lawyer for this case? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, name of your lawyer:	Lawyer's phone No.:
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Have you filed a court case against the suspect? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, please list the Case # and Court Location: Case Number: Court Name:
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**Please describe the details of the incident in the order they happened. Give dates and how you discovered you were the victim of a crime. \* (Please attach additional pages if you need more space.)**

Did someone help you fill out this complaint? If yes, list that person's name, address, phone number, and how that person is related to you.

### Important Information

- The District Attorney's Office will not attempt to delay or stop a foreclosure sale. If you believe your home is being wrongfully foreclosed upon you should talk to a private civil attorney.
- Please include **copies** of any supporting documents that help prove you were a victim of a crime, such as any contracts, deeds, loan documents, escrow papers, receipts, letters, checks, emails etc.  
**Important!** Do **not** include any original documents. **Save** your original documents, including text messages, e-mails, and other communications between you and the suspect(s). You may need them later.

### Statement

By submitting this complaint, I affirm that the information herein is true and accurate.

Signature	Print Name	Date
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