

RICS Client Money Protection Claims Form

Please fill in your details in the below fields and submit to regulation@rics.org or to the below address:

Head of Registration and Compliance

RICS Regulation

55 Colmore Row

Birmingham

B3 2AA

If you have any questions about the RICS Client Money Protection Scheme please consult https://rics.org or you can address your questions directly to regulation@rics.org

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Personal details	
Name	
Preferred phone number	
Email address	
Address	
Address	
Details of firm	
Name of firm that your claim is against	
Address of firm that your claim is against (if known)	

Details of firm	
Contact details of firm that your claim	
is against (if known)	
Ni-u	
Name of main point of correspondence [if known]	
[II KIIUWII]	
RICS membership number of firm (if	
known)	
Details of claim	
Details of claim	
Date of loss of funds	
Date of loss of fullus	
Date you were made aware of the loss	
of funds	
or range	
0 1 (3) 1 1 1 1 1 1	
Service(s) being provided to you by the	
firm your claim is against, e.g. letting	
agent, property manager, etc.	
Address of the property (or properties)	
that is the subject of your claim	
Details of the claim, e.g. circumstances,	
timeline of events and any	
correspondence (open text)	



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Other organisations from which you have sought restitution with regards to the claim, e.g. the firm, the insurers of the firm, tenancy deposit protection schemes, other client money protection schemes. Please supply any evidence you might have of having sought restitution from other sources. Please note that the RICS CMPS is a scheme of last resort.

Please make sure to include copies of all supporting evidence of your claim.

Submitted on behalf of the claimant by the following:

Title	Signature	Print name

Date:
