PRLS BOND/CASH DEPOSIT CLAIM

RE 259 (Rev. 9/14)

GENERAL INFORMATION

- Read PRLS Claim Procedure (RE 258) before completing this form.
- Type or print clearly in ink.
- Attach *certified* copies of the court complaint and judgment, and photocopies of rental contract and any related correspondence, front and reverse sides of cancelled checks, and receipts.

CLAIM INFORMATION

YOUR FULL NAME - LAST, FIRST & MIDDLE [IDENTIFIES YOU AS THE CLAIMANT]

CLAIMANT'S RESIDENCE ADDRESS – STREET ADDRESS

CITY		STATE	ZIP CODE	
CLAIMANT'S BUSINESS ADDRESS – STREET ADDRESS				
СІТҮ		STATE	ZIP CODE	
CLAIMANT'S OCCUPATION	BUSINESS TELEPHONE NUMBER	RESIDENCE TELEPHONE NUMBER		
FULL NAME OF PREPAID RENTAL LISTING SERVICE		BUSINESS TELEPHONE NUMBER		

NAME OF AGENT OR REPRESENTATIVE - LAST, FIRST & MIDDLE

WHERE WAS CONTRACT SIGNED? BUSINESS ADDRESS - STREET ADDRESS

CITY		STATE	ZIP CODE
DATE OF TRANSACTION	DATE REFUND REQUESTED		
REASON REFUND REQUESTED			

RESPONSE OF LICENSEE

RE 259	Pag	ge 2 of 2
DID YOU FILE A LAWSUIT AGAINST THE LICENSEE?	CASE NU	JMBER
YES NO IF YES, LIST THE CASE NUMBER AN	COURT INFORMATION.	
NAME AND ADDRESS OF COURT		
DID YOU WIN A JUDGMENT AGAINST THE LICENSEE?		
AMOUNT OF JUDGMENT COLLECTED (IF ANY)	AMOUNT OF JUDGMENT THAT HAS NOT BEEN PAID	
DESCRIBED WHAT STEPS WERE TAKEN TO COLLECT JUDGMENT		
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Certi	ication	
I certify under penalty of perjury the foregoing statement and	attachments thereto are true and correct.	
SIGNATURE OF CLAIMANT	DATE SIGNED	

SIGNAI	URE	OF	CLA
\triangleright			

LOCATION OF CERTIFICATION (CITY, STATE)

DATE SIGNED
