

APPLICATION FOR PAYMENT FROM THE REAL ESTATE RECOVERY FUND

Use this form to submit an application for payment from the Arizona Department of Real Estate Recovery Fund. This completed application must be accompanied by the following attachments. Identify them with a cover sheet that has the number assigned below and lists or describes each document:

- 1) Purchase contract, escrow instructions, settlement statements, property management agreements, leases, checks, and other documents pertinent to the transaction.
- 2) Letters, memos, faxes, emails, checks, invoices, ledgers, accountancy, bank statements, and other writings to prove your out of pocket losses that result from the real estate transaction.
- 3) Original civil complaint and the amended version of those documents upon which the civil judgment is based, including answers, third-party complaints, and motions for summary judgment.
- 4) Original criminal information, complaint and/or indictment, and the amended versions of those documents explaining the basis for the judgment or Criminal Restitution Order (CRO).
- 5) All orders dismissing any party from the civil lawsuit or criminal case, together with the motions, stipulations, minute entries, and other court documents upon which the dismissal is based.
- 6) All minute entry orders, statements of decisions, or other statements by a judge or jury on determination of guilt and/or monetary awards in the criminal or civil case.
- 7) All criminal conviction documents, including plea agreements, sentencing documents, jury or court verdicts, etc.
- 8) All CROs and civil judgments entered. (Must be certified copies issued by the court bearing the court's filing stamp and county recorder's office information.) If it is an amended judgment, only the last amended version must be certified and recorded.
- 9) All notices of appeal, appellate court decisions, court orders on mandate, etc.
- 10) Abstracts of judgment bearing evidence of having been recorded in the county or counties in which the judgment debtor may possibly reside or have assets.
- 11) Documentation of collection efforts conducted by you or on your behalf, including searches and inquiries with respect to the assets of the judgment debtor(s) liable to be sold or applied to satisfaction of the judgment, an itemized valuation of any assets discovered including a description of the results of actions to have the assets applied to satisfaction of the judgment (include judgment debtor exams and other examinations under oath, writs of execution, attachment and garnishment, and all returns thereon).
- 12) Bankruptcy filings including notice to creditors and orders of discharge or dismissal in any bankruptcy for judgment debtor or any other liable party, together with any orders and their associated applications, motions or stipulations, which relate specifically to the debt owed to me.
- 13) All settlement agreements, insurance claim awards, tax returns or tax benefit calculations, or other documents concerning tax benefits or payment of a portion of the losses from the transaction.
- 14) Notice of your Application as served on the judgment debtor.
- 15) Proof of service of the Notice and Application to the judgment debtor.
- 16) Itemized affidavit of attorney's fees and statement of court costs.
- 17) A statement of improper actions of any licensee who is a judgement debtor that was cited in your lawsuit. If the licensee was a principal in the transaction, include any misrepresentations or fraud that occurred.
- 18) A chronological narrative describing all related facts that are the basis for the judgement or CRO. Include dated, dollar amounts, participants, witnesses, descriptions, address of the property involved, and important statements by anyone. Include any other supporting documentation.

Once complete, this form and additional documents should be submitted through our [Message Center](#).

[Application for Payment from the Real Estate Recovery Fund - Rev. 06/2025](#) | www.azre.gov

Questions regarding this communication can be sent to Mandy Neat, ADRE Deputy Commissioner, at 602-771-7724 or online through the ADRE Message Center

CLAIMANT INFORMATION		
Name:		
Address:		
City:	State:	ZIP:
Phone:	Email:	
Attorney Name:	Law Firm:	
Address:		
City:	State:	ZIP:
Phone:	Email:	

LICENSEE INFORMATION		
Name:	License Number (if known):	
Address:		
City:	State:	ZIP:
Phone:	Email:	
Entity Name:	Designated Broker:	
Attorney Name:	Law Firm:	
Address:		
City:	State:	ZIP:
Phone:	Email:	

ADDITIONAL PARTIES			
List any other parties to the lawsuit as applicable.			
1.	Name:	License Number (as appropriate):	
	Address:		
	City:	State:	ZIP:
	Phone:	Email:	
	Association to lawsuit:		
2.	Name:	License Number (as appropriate):	
	Address:		
	City:	State:	ZIP:
	Phone:	Email:	
	Association to lawsuit:		
3.	Name:	License Number (as appropriate):	
	Address:		
	City:	State:	ZIP:
	Phone:	Email:	
	Association to lawsuit:		

ADDITIONAL LAWSUIT INFORMATION		
If any party responsible for your losses was a salesperson or broker employed by another broker, did you sue their employer? A.R.S § 32-2188(E)(7).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If not, list the parties you did not sue and explain:		
If there are any parties other than a defendant who is the subject of a CRO who are potentially liable for your losses, did you include those parties in your civil lawsuit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If not, list the parties you did not sue and explain:		
Has any other party liable for your losses been dismissed or omitted from the civil lawsuit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, list each party and explain the reason for their dismissal or omission A.R.S § 32-2188(E)(6) and (7):		

JUDGMENT OR CRO ON WHICH THIS APPLICATION IS BASED		
Attach additional copies of this page as needed for each CRO.		
Type:	<input type="checkbox"/> Civil Judgment	<input type="checkbox"/> Criminal Restitution Order
Date Issued:	Court Number:	Case Number:
Recording Date:	County, State:	Docket/Other ID:
Damages awarded in the Judgment or CRO:		
1.	Description:	Amount:
2.	Description:	Amount:
3.	Description:	Amount:
4.	Description:	Amount:
5.	Description:	Amount:
6.	Attorney's fees:	Amount:
7.	Court awarded costs:	Amount:
8.	Interest:	Amount:
8.1.	Interest Rate:	Rate:
9.	Punitive Damages:	Amount:
10.	Total Judgment:	Amount:
Describe interest computations:		
Collection of Judgement. By law, you must exhaust all collection efforts against all parties before filing this application. A.R.S. § 32-2188(E).		
Have you exhausted all collections efforts against all judgment debtors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you pursued collection efforts against all other persons liable to you in the transaction that is the basis for the judgment or CRO?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

JUDGMENT OR CRO ON WHICH THIS APPLICATION IS BASED

If no, explain:

List all attempts to collect the judgment from all judgment debtors. Include amounts recovered from garnishments, attachments, executions, and sale of debtor's property:

CLAIM AGAINST RECOVERY FUND

By law, only a claimant's actual and direct loss, reasonable attorney's fees, prejudgment interest (at the legal rate from the date of loss), and court costs, are payable from the Recovery Fund. Action and direct loss includes out of pocket losses and excludes loss of anticipated profits and speculative and punitive damages. A.R.S § 32-2186(G).

Amount of claim against the Arizona Real Estate Recovery Fund:

Itemize each amount claimed and how it was appropriated:

1.	Description:	Amount:
2.	Description:	Amount:
3.	Description:	Amount:
4.	Description:	Amount:
5.	Description:	Amount:

For other claims that are not normally recoverable from the Recovery Fund, list them here and explain why you believe they are recoverable in this case. Refer to applicable statutes and case law that support this position:

1.	Description:	Amount:
	Justification:	
2.	Description:	Amount:
	Justification:	
3.	Description:	Amount:
	Justification:	
4.	Description:	Amount:
	Justification:	
5.	Description:	Amount:
	Justification:	

ADDITIONAL INFORMATION		
Have you ever been licensed as a real estate or cemetery salesperson or broker? A.R.S §32-2186(D).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, list state(s) licensed in, dates, and type of license:		
Has your spouse, or an officer, director, owner, stockholder, or partner with at least 10% interest in any claimant ever held a real estate or cemetery salesperson or broker's license?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, list state(s) licensed in, dates, and type of license:		
Are you a spouse of the judgment debtor or a personal representative of the spouse? A.R.S. § 32-2188(E)(8)(a).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you assigned or transferred all or any part of your interest in the judgment or CRO?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you signed a partial or full satisfaction of the judgment or CRO? A.R.S. § 32-2192(C).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please state the terms, dates, and amounts satisfied or paid:		
Was the civil lawsuit on which the judgment is based prosecuted conscientiously and in good faith? A.R.S. § 32-2188(E)(8).	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you aware of anyone else who incurred monetary losses or damages in a real estate or cemetery transaction due to the actions of any agent who is a judgment debtor?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If so, list who:		
Was this application mailed or delivered to the Department within two (2) years after the judgment became final or the CRO was issued?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If not, are you requesting a waiver?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you are requesting a waiver, please explain why you believe you are entitled to a waiver. A.R.S § 32-2188(C):		
Do you have any knowledge or information that any judgment debtor has filed or intends to file for bankruptcy protection?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, what is the bankruptcy case number:		
Did you receive a Notice to Creditors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is your judgment based upon a determination of non-dischargeability in a bankruptcy proceeding filed by the judgment debtor?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, what is the bankruptcy case number:		
Did you file a claim in the bankruptcy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If not, explain why:		
Was any attempt made to have the debt owed to you determined non-dischargeable?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If not, explain why. If yes, describe the result:		

ADDITIONAL INFORMATION		
Was the debt underlying the judgment (and/or the judgment) discharged in the bankruptcy proceeding?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, explain why: If yes, provide the date it was discharged and why:		
Do you have any knowledge or information that any other person or persons liable to you in the transaction filed or intends to file bankruptcy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, provide their names and dates that bankruptcy was filed:		
Did you file a claim in the bankruptcy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If not, explain why:		
Was any attempt made to have the debt owed to you determined non-dischargeable?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If not, explain why. If yes, describe the result:		

SIGNATURE	
I understand that it is my obligation to comply with the statutes, rules, and regulations set forth by Arizona Law and that such laws may be referenced at azleg.gov and azsos.gov .	
Name:	Date:
Signature:	

VERIFICATION BY OFFICER OR MEMBER OF A CORPORATION, PARTNERSHIP, OR OTHER ENTITY	
I am authorized to make this affidavit on behalf of the Claimant. I have read the application and all attachments. I certify that the same is true of my own knowledge. I further certify that all documents attached to the application are true and correct copies of the originals, and if such documents purport to be copies of documents filed in court, they are true and correct copies of the originals filed with the court.	
Company Name:	Title:
Signature:	

ATTORNEY'S STATEMENT	
I state that I am the attorney for the Claimants. I have read, prepared, and or assisted in the preparation of this application, and believe the information provided to be true. I obtained or have reviewed all documents attached to this application and believe them to be true and correct copies of the originals, and if such documents purport to be copies of documents filed in court, they are true and correct copies of the originals filed with the court.	
Name of Attorney's Firm:	Date:
Signature:	