



Illinois Department of Financial and Professional Regulation
Division of Real Estate

OFFICE OF THE CONDOMINIUM AND COMMON INTEREST COMMUNITY OMBUDSPERSON
Inquiry Form

First Name: _____ Last Name: _____

Address: _____ Unit No.: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Name of Your Association: _____

My inquiry is as follows:

Please complete and return via email to: FPR.CCICO@illinois.gov
DO NOT MAIL A HARD COPY OF THIS FORM TO THE OMBUDSPERSON. THE OMBUDSPERSON WILL ONLY CONSIDER INQUIRIES RECEIVED BY EMAIL. HARD COPIES WILL NOT BE ACCEPTED.