

**Your claim must  
be submitted online  
or postmarked by:  
March 16, 2026**

***Nicotra v. Bayside NY Homes LLC, D/B/A Keller  
Williams Realty Landmark.***  
Case No. 1:24-cv-04459-FB-TAM  
U.S. District Court for the Eastern District of New York  
**CLAIM FORM**

# BNH CLAIM

## Section I - Instructions

**This Form must be received by the Settlement Administrator no later than March 16, 2026.**

This Claim Form may be submitted in one of two ways:

1. Electronically through [www.realtyTCPASettlement.com](http://www.realtyTCPASettlement.com)
2. Mail to: *KWRL TCPA Settlement*, Attn: Claim Forms, 1650 Arch Street, Suite 2210, Philadelphia, PA, 19103.

To be effective as a Claim under the proposed settlement, this form must be completed, signed, and submitted, as outlined above, **no later than March 16, 2026**. If this Form is not postmarked or submitted by this date, you will remain a member of the Class but will not receive any payment from the Settlement.

If you received a notice regarding the Settlement by mail or email, the notice includes your Claimant Identification Number, which is required to make a Claim. If you do not have a Claimant Identification Number, you can request one by contacting the Settlement Administrator via email to [info@realtyTCPASettlement.com](mailto:info@realtyTCPASettlement.com) or by calling 1-888-997-4232

## Section II - Class Member Information

**Claimant Name (Required):**

[illegible]

**Notice ID (Required):**

[illegible]

### **Current Contact Information**

**Street Address (Required):**[illegible]**City (Required):**

**State (Required):**

**Zip Code (Required)**[illegible]

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# BNH CLAIM

**Email (Optional):**

[illegible]

**Preferred Phone Number (Required):**

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*Your contact information will be used by the Settlement Administrator to contact you, if necessary, about your Claim. Provision of your email address is optional. By providing contact information, you agree that the Settlement Administrator may contact you about your Claim.*

### Section III – Confirmation of Class Membership

Telephone number(s) registered on the National Do Not Call Registry you are associated with to determine if it is within the unique telephone numbers related to the Settlement Class Members:


## Section IV – Election of Payment

Please select your preferred method of payment for any approved Claim:

Check mailed to the address identified above in Section II

**PayPal** - Enter your PayPal email address:

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**Venmo** - Enter the mobile number associated with your Venmo account: \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
\_\_\_\_

**Zelle** - Enter the mobile number or email address associated with your Zelle account:

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**BNH  
CLAIM**

Mobile Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ or

Email Address: \_\_\_\_\_

**Section V – Required Affirmations**

IF SUBMITTED ELECTRONICALLY:

☐ I agree that, by submitting this Claim Form, the information in this Claim Form is true and correct to the best of my knowledge. I understand that my Claim Form may be subject to audit, verification, and Court review. I am aware that I can obtain a copy of the full notice and Settlement Agreement at [www.realtyTCPAsettlement.com](http://www.realtyTCPAsettlement.com) or by writing the Settlement Administrator at the email address [info@realtyTCPAsettlement.com](mailto:info@realtyTCPAsettlement.com) or the postal address ***KWRL TCPA Settlement, Attn: Claim Forms, 1650 Arch Street, Suite 2210, Philadelphia, PA, 19103.*** Checking this box constitutes my electronic signature on the date of its submission.

IF SUBMITTED BY U.S. MAIL:

I agree that, by submitting this Claim Form, the information in this Claim Form is true and correct to the best of my knowledge. I understand that my Claim Form may be subject to audit, verification, and Court review. I am aware that I can obtain a copy of the full notice and Settlement Agreement at [www.realtyTCPAsettlement.com](http://www.realtyTCPAsettlement.com) or by writing the Settlement Administrator at the email address [info@realtyTCPAsettlement.com](mailto:info@realtyTCPAsettlement.com) or the postal address ***KWRL TCPA Settlement, Attn: Claim Forms, 1650 Arch Street, Suite 2210, Philadelphia, PA, 19103.***

Dated: \_\_\_\_\_

Signature: \_\_\_\_\_