



REFERRAL AGREEMENT

Referral Type Seller__ Buyer__ Landlord__ Renter__ Commercial

Receiving Office (Company And Agent which are ACCEPTING the referral)

Company Name : _____ Agent Name _____

Address : _____ City _____ State _____ ZIP _____

Email : _____

Phone (W) _____ (C) _____ (F) _____

Referring Office (Company And Agent which are GIVING the referral)

Company Name : _____

Agent Name : _____ Broker Name _____

Address : _____ Email : _____

Phone : (W) _____ (M) _____

Customer Information (for a LISTING Referral, put owner info / for a BUYER/RENTER referral)

Customer's Name : _____ Email _____

Address : _____ City _____ State _____ ZIP _____

Phone (W) _____ (C) _____ (F) _____

Property Information

Property Address : _____

The Receiving Broker agrees to accept this referral and pay _____ of the net commission collected by _____ to the _____ upon receipt of funds from the first successful sale or lease with the above customer or property referred.

Receiving Office : _____ Receiving Agent : _____

Referring Office : _____ Referring Agent : _____