



Referral Form

Receiving Agent Information

Agent Name: _____
 Office Name: _____
 Address: _____
 City: _____
 State/Prov: _____ Zip/PC: _____
 Country: _____
 E-mail: _____
 Primary Phone: _____
 Cell Phone: _____
 Fax Number: _____

Client Information

Name: _____
 Current Address: _____
 City: _____
 State/Prov: _____ Zip/PC: _____
 Country: _____
 Additional Information: _____

Sending Agent Information

Agent Name: _____
 Office Name: _____
 Address: _____
 City: _____
 State/Prov: _____ Zip/PC: _____
 Country: _____
 E-mail: _____
 Primary Phone: _____
 Cell Phone: _____
 Referring Office Tax ID Number: _____
 Fax Number: _____

Current Home Phone Number: _____
 Current Work Phone Number: _____
 Cell Phone Number: _____
 Number of Adults in move: _____
 Number of Children in move: _____
 Next Date of Home Finding Trip: _____
 Expected Move Date: _____

Current Property Information

Client is a: _____ Estimated property listing price: _____ Must clients sell first: _____
 Has client been pre-qualified? _____ Lender Information: _____
 Reason for move: _____

Desired Property Information

Price Range: _____ Est. Down Payment: _____ Desired Monthly Payment: _____
 Preferred Home Style: Single Family Home Condo/Town Home Other
 Number of Bedrooms: _____ Number of Baths: _____ Square Footage: _____
 Familiar with the area: _____ Preferred Area: _____ School Requirements:
 Elementary Jr. High Sr. High College Additional
 Requirements: _____

Referral Agreement Details

By signing this form as the receiving agent, _____, agrees to have his/her broker-in-charge pay an agreed upon referral fee of: _____ % or \$ _____ flat fee, to the sending agent's broker-in-charge, for the benefit of the sending agent, _____.

Percentage-based referral fees will be based on commissions earned on the: Listing Side _____ Selling Side _____ Other (please specify) _____

Sending Agent Signature: _____ Date: _____
 Receiving Agent Signature: _____ Date: _____