



1919 Hylan Boulevard

Staten Island, NY 10306

Office: 718-954-8499 Fax: 347-517-4448

Date: _____

Property: _____

I/We _____, hereby verify that I/We choose to have all proposals for the property located at _____ communicated through my listing agent (s) _____ of Keller Williams Realty Empire.

Owner:
