



REFERRAL FORM

SENDER INFO

Sender: _____ Roster Code _____

Sender's Email: _____

Brokerage Code: _____

Street: _____

City: _____ State/Prov _____

Zip/PC: _____ Office #: (____) _____

RECIPIENT INFO

Recipient: _____ Roster Code _____

Recipient's Email: _____

Brokerage Code: _____

Street: _____

City: _____ State/Prov _____

Zip/PC: _____ Office #: (____) _____

CLIENT INFO

Name: _____

Address: _____ State/Prov: _____ Zip/PC _____

Res. Phone: (____) _____ Cell Phone (____) _____

SELLER REFERRAL INFO.

Reason: Transfer ☐ New Job ☐ Other ☐

Move Definite: Yes ☐ No ☐

Spouse: _____

Dependants: _____

Additional Info: _____

BUYER REFERRAL INFO.

Price Range: \$ _____

Down Payment: \$ _____

Type of Home: _____

Bdrms: _____ # Baths: _____

Other Requirements: _____

Must Customer Sell First? _____

Is their property presently listed? _____

ACKNOWLEDGEMENT

The sender hereby agrees to receive _____% of the listing/buying (circle one) commission and the recipient agrees to pay this referral percentage of the listing/buying (circle one) commission to the sender.

Sender's Signature _____ Date _____ Recipient's Signature _____ Date _____

Sender's Broker's Signature _____ Date _____ Recipient's Broker's Signature _____ Date _____

Client's Signature (if requirement by state/province) _____ Date _____

DISPOSITION OF REFERRAL RECEIVED

(Shall be in accordance with Transaction Record Sheet – copy to accompany payment)

Our Check/Transaction No. _____ for \$ _____ representing _____% of the commission received on this transaction.

Closing Date: _____

Total Commission paid at closing: \$ _____

Less:

Paid to local co-op REALTOR, if any: \$ _____

Comments: _____

Sale Price: \$ _____

COMPLETE AND RETURN TO SENDER IF REFERRAL IS UNSUCCESSFUL

- ☐ Referral Rented
- ☐ Decided not to move from original city
- ☐ Unable to contact
- ☐ Moved to another area / city
- ☐ Other: _____