



REFERRAL FORM

SENDER INFO

Sender: _____ Roster Code _____
 Sender's Email: _____
 Brokerage Code: _____
 Street: _____
 City: _____ State/Prov. _____
 Zip/PC: _____ Office #: _____

RECIPIENT INFO

Recipient: Emily Ross Roster Code 9957141
 Recipient's Email: soldbyemilyross@gmail.com
 Brokerage Code: 995708282
 Street: 3701 Maplewood
 City: Sulphur State/Prov. LA
 Zip/PC: 70663 Office #: 409-779-9959

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: _____
 Dependents: _____
 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	Recipient's Signature
Date	Date
Sender's Broker's Signature	Recipient's Broker's Signature
Date	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: \$ _____

Sale Price: \$ _____

COMPLETE AND RETURN TO SENDER IF REFERRAL IS UNSUCCESSFUL

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

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