



## Referral Agreement

Referral fee \$  Date:   
\$  % of LOC \$  % SOC \$  % Sale Price

1. Referring Broker:  MLS Office #

Licensee Name:

Address:

Phone:  Fax:  email:

2. Destination Broker:  MLS Office #

Licensee Name:  Address:

Phone:  Fax:  Email:

3. Prospect Information  Seller  Buyer  Other

Name:  Address:

Phone:  Fax:  Email:

Comments:

4.

### Terms of Referral:

Destination Broker shall pay to Referring Broker the Referral fee if, within  months (eighteen (18) months if not filled in) of the date of this Agreement, Destination Broker is paid a commission as a result of the services it provides to Prospect.

\_\_\_\_\_  
Referring Licensee

\_\_\_\_\_  
Destination Licensee