

Real Estate Referral Agreement

REFERRING AGENT / BROKER

First Name: _____ Last Name: _____
Company: _____ Address: _____
City: _____ State/Region/Province: _____ Postal Code: _____
Email: _____ Phone: _____
Preferred Receiving Agent Name and Office Location (if applicable): _____

REFERRAL AGREEMENT DETAILS

All referrals submitted are subject to pre-qualification. In order to process referrals timely, we need all required fields to be filled out when submitting the form online, blank fields may result in the delay of processing.

Referring Agent/Broker acknowledges that the United Referral Network provides a concierge service through UC-SCS. To cover administrative costs of the program, UC-SCS charges a 35% referral fee to the Receiving Broker/Agent. In the event Receiving Agent/Broker receives a commission or other payment for services rendered in connection with a real estate transaction consummated involving the Referred Client, Referring Agent/Broker will be entitled to a 25% referral fee. Referring agent remains responsible for any fees owed to his/her brokerage.

The referral fee shall be fully paid no later than 10 business days after the transaction is completed.

CLIENT INFORMATION

First Name: _____ Last Name: _____
Address: _____ City: _____
State/Region/Province: _____ Postal Code: _____
Email: _____ Phone: _____
Reason for Buying / Selling : _____

Selling: Current Property Information

Estimated Property Listing Price: _____ Client Must Sell By: _____
Property Type: _____
Description: _____

Buying: Desired Property Information

Price Range: _____
Property Type: _____
Desired Timeframe to Buy: _____
Preferred Area: _____ Square Footage or Acreage: _____
Requirements or Preferences: _____

Authorized Referring Agent/Broker

Date

SUPPORTING DOCUMENTS CAN BE EMAILED TO CLIENTCONCIERGE@URE-GROUP.COM.