

**KELLER WILLIAMS REALTY
REFERRAL INFORMATION FORM**

SECTION 1 - RECEIVING OFFICE		SENDING OFFICE	
TO: Agent:	FROM: Agent:	Firm Name:	* TAX ID #:
Address:	Address:	*TAX ID #:	* TAX ID #:
City/State/Zip:	City/State/Zip:	Business Phone:	Business Phone:
Home Phone:	Home Phone:	Fax Phone:	Fax Phone:

***REQUIRED W9 form must accompany this Referral form**

SECTION 2 - SELLER INFORMATION	
Seller Name:	When to make initial contact:
Address:	Property address to be listed:
City/State/Zip:	
Business Phone:	
Home Phone:	Additional Helpful Information:
Fax Phone:	

SECTION 3 - BUYER INFORMATION	
Buyer's Name:	New Employer:
Address:	Address:
City/State/Zip:	City/State/Zip:
Business Phone:	Position and Approximate Salary:
Home Phone:	Must home be sold first?
Fax Phone:	Company buyout?
Preferred Location:	Cash Available for Purchase and Closing Costs:
Size and Type of Home Desired:	Contact Buyer at this no. first: By this date:
Price Range: \$	Expected Arrival Date: Moving Date:
Number in Family:	Comments:
Adults:	
Children: Age:	
	Age:
	Age:

SECTION 4 - REALTOR'S ACCEPTANCE OF REFERRAL	
Prospect's Name:	Comment:
Date Contacted:	
Date of First Appointment:	
WE ACCEPT THIS REFERRAL, AND WHEN THE SALE IS CONSUMMATED, WE AGREE TO SEND 25 % (OF THE GROSS COMMISSION) REFERRAL FEE. WE WILL ENCLOSE DETAILS OF THE SALE WITH THE CHECK.	

Receiving Sales Associate Signature: Date: / /	Receiving Broker's Signature: Date: / /
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- PLEASE PHOTOCOPY FOR COPIES -

