



TEXAS HOME GROUP REALTORS®
REFERRAL INFORMATION FORM

| SECTION 1 - RECEIVING OFFICE | | SENDING OFFICE | |
|------------------------------|--|-----------------|--|
| TO: Agent: | | From: | |
| Firm Name: | | Firm Name: | |
| Address: | | Address: | |
| City/State/Zip: | | City/State/Zip: | |
| Agent Cell Phone: | | Business Phone: | |
| Email Address: | | Fed Tax ID: | |
| Office Phone: | | Fax Phone: | |

| SECTION 2 - SELLER INFORMATION | |
|--------------------------------|--------------------------------|
| Seller Name: | When to make initial contact |
| Address: | Property address to be listed: |
| City/State/Zip: | |
| Cell Phone: | Additional Info: |

| SECTION 3 - BUYER INFORMATION | |
|-------------------------------|----------------------------------|
| Buyer Name: | New Employer: |
| Address: | Address: |
| City/State/Zip: | City/State/Zip: |
| Cell Phone: | Position and Approximate Salary: |
| Preferred Location: | Additional Info: |

| SECTION 4 - REALTOR'S ACCEPTANCE OF REFERRAL | |
|--|----------|
| Prospect's Name: | Comment: |
| Date Contacted: | |

WE ACCEPT THIS REFERRAL, AND WHEN THE SALE IS CONSUMMATED,
WE AGREE TO SEND _____%. (OF THE GROSS COMMISSION) REFERRAL FEE.
WE WILL ENCLOSE DETAILS OF THE SALE WITH THE CHECK.

| | |
|-------------------------------|-----------------------------|
| Receiving Broker's Signature: | Sending Broker's Signature: |
| X | X |
| Date: / / | Date: / / |