



Real Estate Referral Agreement

Referring Agent / Broker

Name: _____.

Company: Lowcountry Referral Specialists _____.

Address: 1132 May River Rd Bluffton SC 29910 _____.

Email: _____.

Phone: _____.

Receiving Agent / Broker

Name: _____.

Company: _____.

Address: _____.

Email: _____.

Phone: _____.

Referral Agreement Details

In the event Receiving Broker / Agent receives a commission or other payment for services rendered in connection with a real estate transaction consummated involving the Referral Client (page 2), Referring Agent / Broker will be entitled to a referral fee, and Receiving Agent / Broker agrees to pay said referral fee in the amount of:

___% of the Buy Side, List Side, Lease commission received by the Receiving Agent / Broker on any real estate transactions involving Referred Client for 1 Year.

The parties hereby agree that the referral fee shall be fully paid by the Receiving/Agent no later than ___ business days after the transaction is completed.

Authorized Referring Agent/Broker

Date

Authorized Receiving Agent/Broker

Date



Real Estate Referral Agreement

Client Information

Name: _____

Address: _____

Email: _____

Phone: _____

Reason for Buying / Selling: _____

Selling Current Property

Address: _____

Buying Property

Area: _____

Budget: _____