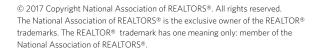
CIPS REFERRAL FORM

DISCLAIMER: In order to assist members, NAR created this sample Referral Form, which should be modified to fit your particular needs. This document is not intended to be and does not constitute legal or professional advice or a substitute for specific legal or professional advice. The user of this document should not use this document without consulting legal counsel. Neither the National Association of REALTORS® nor its International REALTOR® Member program enters into mediation or arbitration processes.

Date of Referral Agreement:		
Referring (Source) Broker/Agent		
NAME:		
COMPANY:		
BUSINESS ADDRESS:		
BUSINESS CITY:		
STATE/REGION/PROVINCE:	POSTAL CODE:	
COMPANY COUNTRY:		
E-MAIL ADDRESS:	WEB SITE:	
FAX (include country code):		
PHONE (include country code):		
Receiving Broker/Agent		
NAME:		
COMPANY:		
BUSINESS ADDRESS:		
BUSINESS CITY:		
STATE/REGION/PROVINCE:	POSTAL CODE:	
COMPANY COUNTRY:		
E-MAIL ADDRESS:	WEB SITE:	
FAX (include country code):		
PHONE (include country code):		



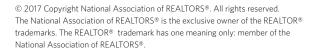




CIPS

REFERRAL FORM

Referral Fee Particulars	
In the event Receiving Broker/Agent receives a commission or other payment for services transaction consummated involving the Referred Client (see attachment 1) within	
Contract is entered into (both parties have signed), Referring Broker/Agent will be entitled	
Broker/Agent agrees to pay said referral fee, in the amount of:	,
cash (incurrency), or	
percent of the list price, sale price, or lease	
commission that Receiving Broker/Agent receives in connection with the foregoing.	
The parties hereby agree that the referral fee shall be fully paid by the Receiving Broker//business days after the transaction is completed. Other (describe)	
*Referral fees may be subject to withholding tax or other forms of taxes in the country in with Referring agents should be aware of state, provincial, or local laws in their respective mark	-
Term	
This contract will expire on(date). If both parties want to cooperate a	after the expiration date, they will have to
execute a new referral contract.	
Signatures	
Authorized Referring Broker/Agent	Date
Authorized Receiving Broker/Agent	Date







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REFERRAL FORM

Attachment 1

CLIENT WORKSHEET

Client Referred

NAME:	
ADDRESS:	
CITY:	
STATE/REGION/PROVINCE:	POSTAL CODE:
E-MAIL ADDRESS:	
FAX (include country code):	
PHONE (include country code):	
Client Particulars	
Property Needs	
Is this property for the client's personal use, or is it intended as an investment?	
Does this client own other real property in the destination country?	
Referring Broker/Agent Prior Experience with this client	
Comments	

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