## Ohio Sheriff Sales REALTOR BUYER REFERRAL REGISTRATION FORM Print this form and fax to 1.877.772.4217 or email to timlileauctioneer@gmail.com

Referring Licensee:	Company	•
Address:		
Real Estate License Number		
As a licensed real estate B	roker/Salesperson, I wisl	n to register the following client:
Registrant Name:		
Address:		
For the upcoming online-o	only foreclosure auction o	f the following subject property:
81	7 Linden Ave., Washington CH, C	Ohio 43160
I understand and acknowledge:		
Agency is NOT in effect. By prop	perly registering your bidder for the	ed via a judicial sale process under Court Order is auction, you are eligible to receive a Buye Registrant be the successful bidder, pay for and
2) I must register my bidder with this scheduled auction end time (no exc	form completed prior to their regist ceptions).	ering online no less than <b>48 hours</b> prior to the
3) No oral registrations will be accepted	ed. Principals to the transaction are	not eligible for fee.
THERE WILL BE NO	EXCEPTIONS TO THESE I	MINIMAL REQUIREMENTS.
In addition to my signature below have read, understand and acknowledges		my Registrant, indicating that they ve.
Referring Licensee Signature:		Date
Registrant Signature:		Date
Private Selling Officer Acknowle	edgment Date	SHERIFF