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:		
	Email:	
Real Estate License Number		
As a licensed real estate l	Broker/Salesperson, I wish to re	egister the following client:
Registrant Name:		
	Email:	
For the upcoming online-	only foreclosure auction of the	following subject property:
360	E. Superior St., Wauseon, OH	43567
I understand and acknowledge:		
Agency is NOT in effect. By pro-	n the subject real property being offered via a perly registering your bidder for this auct strant's *WINNING BID should my Registr	ion, you are eligible to receive a Buye
2) I must register my bidder with this scheduled auction end time (no ex	s form completed prior to their registering oxceptions).	online no less than 48 hours prior to the
3) No oral registrations will be accept	ted. Principals to the transaction are not elig	gible for fee.
THERE WILL BE NO	EXCEPTIONS TO THESE MINI	MAL REQUIREMENTS.
	ow, please find the signature of my Ronowledge acceptance of the above.	egistrant, indicating that they
Referring Licensee Signature: _		Date
Registrant Signature:		Date
Private Selling Officer Acknowle	edgment Date	SHERIFF