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:	
	Email:	
Real Estate License Number		
As a licensed real estate B	roker/Salesperson, I wish to register the follou	ving client:
Registrant Name:		
	Email:	
For the upcoming online-o	only foreclosure auction of the following subjec	et property:
1023 S. Hinde	Street, Washington Court House, OH 43160)
I understand and acknowledge:		
Agency is NOT in effect. By prop	the subject real property being offered via a judicial sale process unperly registering your bidder for this auction, you are eligible to rant's *WINNING BID should my Registrant be the successful bits a successful bits and the successful bits a	receive a Buye
2) I must register my bidder with this scheduled auction end time (no exc	form completed prior to their registering online no less than 48 h ceptions).	ours 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 MINIMAL REQUIREM	<u>IENTS.</u>
	w, please find the signature of my Registrant, indicating owledge acceptance of the above.	g that they
Referring Licensee Signature:	Date	
Registrant Signature:	Date	
Private Selling Officer Acknowle	edgment Date	IIFF I