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:	C	Company:	
Address:			
Phone:	Em	ıail:	
Real Estate License Number			
As a licensed real estate B	roker/Salespersor	ı, I wish to regis	ster the following client:
Registrant Name:			
Address:			
Phone:			
For the upcoming online-o	nly foreclosure aı	ıction of the foll	owing subject property:
414 North Water	Street, Georgetow	vn (Pleasant TW	P), Ohio 45121
I understand and acknowledge:			
1) As this is a foreclosure action with t Agency is NOT in effect. By prope Referral Fee equal 1% of my Registr close on the transaction.	erly registering your bid	der for this auction,	you are eligible to receive a Buye
2) I must register my bidder with this scheduled auction end time (no exc	form completed prior to teptions).	heir registering online	e no less than 48 hours prior to the
3) No oral registrations will be accepted	ed. Principals to the transa	action are not eligible f	for fee.
THERE WILL BE NO I	EXCEPTIONS TO T	HESE MINIMA	L REQUIREMENTS.
In addition to my signature below have read, understand and acknowledge.	, <u>r</u>	• 0	trant, indicating that they
Referring Licensee Signature:			Date
Registrant Signature:			_ Date
Private Selling Officer Acknowled	dgment	Date	SHERIFF