## **Ohio Sheriff Sales, LLC**

## BUYER BROKER REGISTRATION FORM

## Print this form and fax to 1.877.772.4217 or email to timlileauctioneer@gmail.com

Broker/Salesperson:		Agency:	
Address:			
Telephone Number:		Email :	
As a licensed real estate broker /	salesperson, I,		,
License Number	; wish to register r	ny client: Name:	
Address:			
Telephone Number: H:		C:	
for the upcoming auction of the	following property:		
	6645 Wolf Creek Pi	ke, Trotwood, Ohio 45426	
understanding that a fee of 2% of my	client's high bid will be on the property and I h	with my client who will register a bid on the paid to the above listed real estate agen ave registered them prior to the auction. In advance (no exceptions).	cy should my client be the
	r expenses, including rea	rmless and indemnify the Auctioneer, Ohio sonable attorney's fee, which may arise ou this property.	
A prospective bidder that has previous will not be eligible as a client for any E		Ohio Sheriff Sales, LLC or the Seller cond	cerning the subject property
THERE WILL BE	NO EXCEPTIONS	S TO THESE BROKER REQUIR	EMENTS.
In addition to my signature below agreed to the above.	w, please find the sig	nature of my client, indicating that t	hey have seen and
Client or Buyer	Date	Broker or Salesperson	Date
		SHERIFF	
Auction Firm Acknowledgemen	t Date		