## 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:			
Phone:	Email:		
Real Estate License Number			
As a licensed real estate B	roker/Salespe	rson, I wish to register the following clien	nt:
Name:			
Address:			
For the upcom	ing auction of	f the following subject property:	
6209 Concerto	Court. W	est Carrollton, Ohio 45449	
	,	(10% will be added	to this figure)*
I understand and acknowledge:  1) That my compensation will be based on 3% of beyond this opening bid should my client be the		PENING BID recorded above PLUS 1% of any are, pay for and close on the transaction.	uction day advance
2) That I am required to either conduct a showing whichever is available.	of the subject pro	operty for my client or accompany them to a schedu	led open inspection
3) I must accompany my client to the auction unlonline.	less bidding onlin	ne. If bidding online, I must register my client prior	to their registering
4) Registration must take place a minimum of 48	<b>hours</b> prior to the	ne scheduled auction time (no exceptions).	
5) No oral registrations will be accepted.			
Sales LLC, and the Seller from any and all clair actions or inactions or representations made by r	ns, costs or expense or in connection in contact with C	Ohio Real Estate Auctions LLC or the Seller cond	nay arise out of any
THERE WILL BE NO EX	CEPTIONS '	TO THESE BROKER REQUIREMEN	<u>TS.</u>
In addition to my signature below, please understand and acknowledge acceptance	_	ature of my client, indicating that they hav	e read,
Broker or Salesperson Signature	Date	Client or Buyer Signature	Date
Authorized Auctioneer Acknowledgmen	ıt Date	SHERIF	