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:				
Real Estate License Numb	er			
As a licensed i	real estate Bi	roker/Salesper	son, I wish to register the following cli	ent:
Name:				
Address:				
Fo	r the upcom	ing auction of	the following subject property:	
	1450 S	Sara Ave., (Galion, OH 44833	
I understand and acknowledge:				
1) That my compensation will be close on the transaction.	based on 2% o	of my client's high	n bid amount should my client be the successfu	l bidder, pay for and
2) That I am required to either con- whichever is available.	duct a showing	of the subject prop	perty for my client or accompany them to a sched	luled open inspection
3) I must accompany my client to	the auction unl	less bidding online	2.	
4) If bidding online, I must registe	er my client pri	or to their register	ing online.	
5) Registration must take place a	minimum of 48	hours prior to the	e scheduled auction time (no exceptions).	
6) No oral registrations will be acc	cepted.			
Auctions LLC, and the Seller from any actions or inactions or representations.	m any and all centations made eviously been i	claims, costs or ex by me or in conne n contact with Ol	shall hold harmless and indemnify the Auctionor, penses, including reasonable attorney's fee, when the sale of this property. The Real Estate Auctions LLC or the Seller coon.	nich may arise out of
THERE WILL	BE NO EX	CEPTIONS T	O THESE BROKER REQUIREME	NTS.
In addition to my signature lunderstand and acknowledge	-	_	ture of my client, indicating that they ha	ive read,
Broker or Salesperson Signa	ature	Date	Client or Buyer Signature	Date
			Q Ho	

Date

Authorized Auctioneer Acknowledgment