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:	
Address:		
Real Estate License Number		
As a licensed real estate l	Broker/Salesperson, I wish	to register the following client:
Registrant Name:		
For the upcoming online-	only foreclosure auction of	the following subject property:
1	134 Pike Street, Sidney, Ohio	0 45365
I understand and acknowledge:		
Agency is NOT in effect. By pro	pperly registering your bidder for this	d via a judicial sale process under Court Orders auction, you are eligible to receive a Buye Registrant be the successful bidder, pay for and
2) I must register my bidder with thi scheduled auction end time (no ex	is form completed prior to their registe exceptions).	ering online no less than 48 hours prior to the
3) No oral registrations will be accep	oted. Principals to the transaction are n	ot eligible for fee.
THERE WILL BE NO	EXCEPTIONS TO THESE M	IINIMAL REQUIREMENTS.
	ow, please find the signature of nowledge acceptance of the above	my Registrant, indicating that they re.
Referring Licensee Signature: _		Date
Registrant Signature:		Date
Private Selling Officer Acknowl	ledgment Date	SHERIFF