## 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:	Comp	Company:	
Address:			
Phone:	Email:_	Email:	
Real Estate License Number			_
As a licensed real estate B	Broker/Salesperson, I ı	wish to register the following clien	t:
Registrant Name:			
Address:			
For the upcoming online-o	only foreclosure auctio	ion of the following subject propert	y:
7885 Greenland	Place, Cincinnati (Spr	ringfield TWP), Ohio 45237	
I understand and acknowledge:			
Agency is NOT in effect. By prop	perly registering your bidder for	g offered via a judicial sale process under Court Or for this auction, you are eligible to receive a B ıld my Registrant be the successful bidder, pay for	uye
2) I must register my bidder with this scheduled auction end time (no exc	form completed prior to their receptions).	registering online no less than <b>48 hours</b> prior to	) the
3) No oral registrations will be accept	ed. Principals to the transaction	on are not eligible for fee.	
THERE WILL BE NO	EXCEPTIONS TO THE	ESE MINIMAL REQUIREMENTS.	
In addition to my signature belo have read, understand and ackn		are of my Registrant, indicating that they e above.	
Referring Licensee Signature:		Date	
Registrant Signature:		Date	
Private Selling Officer Acknowle	edgment Dat	ate	