



# RE/MAX International Referral Form

## Receiving Agent Information

Agent Name: \_\_\_\_\_  
Office Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Zip/PC: \_\_\_\_\_  
Country: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Primary Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

## Referring Agent Information

Agent Name: \_\_\_\_\_  
Office Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Zip/PC: \_\_\_\_\_  
Country: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Primary Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Referring Office Tax ID Number: \_\_\_\_\_

## Client Information

Name: \_\_\_\_\_  
Current Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/PC: \_\_\_\_\_  
Country: \_\_\_\_\_  
Additional Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Current Home Phone Number: \_\_\_\_\_  
Current Work Phone Number: \_\_\_\_\_  
Cell Phone Number: \_\_\_\_\_  
Number of Adults in move: \_\_\_\_\_  
Number of Children in move: \_\_\_\_\_  
Next Date of Home Finding Trip: \_\_\_\_\_  
Expected Move Date: \_\_\_\_\_

## Current Property Information

Client is a: \_\_\_\_\_ Estimated property listing price: \_\_\_\_\_ Must clients sell first: \_\_\_\_\_  
Has client been pre-qualified? \_\_\_\_\_ Lender Information: \_\_\_\_\_  
Reason for move: \_\_\_\_\_  
\_\_\_\_\_

## Desired Property Information

Price Range: \_\_\_\_\_ Est. Down Payment: \_\_\_\_\_ Desired Monthly Payment: \_\_\_\_\_  
Preferred Home Style: Single Family Home \_\_\_\_\_ Condo/Town Home \_\_\_\_\_ Other \_\_\_\_\_  
Number of Bedrooms: \_\_\_\_\_ Number of Baths: \_\_\_\_\_ Square Footage: \_\_\_\_\_  
Familiar with the area: \_\_\_\_\_ Preferred Area: \_\_\_\_\_  
School Requirements: Elementary \_\_\_\_\_ Jr. High \_\_\_\_\_ Sr. High \_\_\_\_\_ College \_\_\_\_\_  
Additional Requirements: \_\_\_\_\_  
\_\_\_\_\_

## Referral Agreement Details

An agreed upon referral fee of \_\_\_\_\_ will be paid by the receiving agent to the referring agent.

The referral fee will be based on: Listing \_\_\_\_\_ Selling \_\_\_\_\_ The Commission \_\_\_\_\_

Referring Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Receiving Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_