

# BETTERHOMESUSA

HOMES IN YOUR TOWN

## REFERRAL FORM

Date:

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To

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Office Name

Agent Name

Address

Phone

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This is to confirm our telephone conversation regarding the referral of our customer(s):

Name:

Phone

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Address

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Should a sale be consummated with the above customer(s), it is mutually agreed that our office will receive a referral fee of \_\_\_\_\_ of the sale commission received by your office.

Thank you,

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VRI Realtors  
BetterHomesNJ.com  
Referring Agent

Tax ID#222379170

Please sign below as an acknowledgement and return one copy to our office. Thanking you in advance for your cooperation.

Name

Company

Date

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# V.R.I. REFERRAL ASSOCIATES

## REFERRAL FORM

Date:

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To

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Office Name

Agent Name

Address

Phone

---

This is to confirm our telephone conversation regarding the referral of our customer(s):

Name:

Phone

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Address

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Should a sale be consummated with the above customer(s), it is mutually agreed that our office will receive a referral fee of \_\_\_\_\_ of the sale commission received by your office.

Thank you,

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Referring Agent

Tax ID#222379170

Please sign below as an acknowledgement and return one copy to our office. Thanking you in advance for your cooperation.

Name

Company

Date

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