

COMPENSATION AGREEMENT/REFERRAL AGREEMENT/CONFIRMATION OF AGENCY

| Referring agent name: | Phone: () |
|---|---|
| | Email: |
| Referring agent's company name: | |
| Company address: | |
| | Date:/ |
| Client signature: | |
| | er the above bidder/ client as a potential purchaser of the |
| Auction Address:Auction Date: | |
| Terms & Conditions | |
| • | to the registered Real Estate Agent if their client is the chase Contract. This fee pertains to the specific property being on contract has been signed at the time of the auction. |
| The referring agent understands that to be qualified, this Principle Auctioneer 48 hours prior to the Auction. If the Athe close of the Auction and prior to the Buyer making and | Auction is online, this form must be returned 48 hours before |
| no oral registrations will be accepted. The Client must also driver's license on the day of the Auction. If the Bidder Cli or with the Auction Company you cannot participate in th | ents name listed above has already signed with another agent is referral program. The referring Real Estate Agent must be Tennessee Real Estate Commission. Signatures on this form |
| Auctioneer is agent for the seller and does not represent t | the buyer(s) in this transaction. |
| | d or not, with Parks Auction. This property is being sold AS-IS, their due diligence prior to the auction sale. Purchase of said alify for financing. |
| If a buyer's premium applies, referrals to be paid on final | <u>oid</u> price. |
| Completed form to be returned to: | office@bobparksauction.com |

Announcements made day of sale take precedence over all other advertising.