



13497 N Hwy 183, Suite 700
Austin, TX 78750
PHONE: 512.249.7368 | FAX: 512.590.8707

Client Referral Agreement

DATED :

CO-OP AGENT INFORMATION:

AGENT'S NAME

AGENT'S ADDRESS

AGENT'S CITY, STATE, ZIP

AGENT'S PHONE

CENTRAL METRO AGENT INFORMATION:

AGENT'S NAME

AGENT'S ADDRESS

AGENT'S CITY, STATE, ZIP

AGENT'S PHONE

REFERRAL CLIENT INFORMATION :

REFERRAL CLIENT'S NAME

REFERRAL CLIENT'S CITY, STATE , ZIP

REFERRAL CLIENT'S ADDRESS

REFERRAL CLIENT'S PHONE NUMBER

I acknowledge that I have received the above listed client as a referral from and agree to compensate referring Broker by paying :

% of total commission received.

% of sales price.

A flat fee in the amount of \$

All compensation shall be considered due and payable at closing. Please sign and either fax to 512.590.8707 or email to DA@centralmetro.com

CO-OP BROKER DATE

CMR BROKER DATE