



INBOUND - INTERNATIONAL REFERRAL AGREEMENT

ORIGINATING BROKER

Brokerage:

Referring Agent's Name:

Agent's Office Address:

Agent's Phone Number:

E-Mail Address:

RECEIVING BROKER

Brokerage:

Receiving Agent's Name:

Agent's Office Address:

Agent's Phone Number:

E-Mail Address:

CLIENT INFORMATION

Client is: Buying Selling Other:

Name(s):

Address:

Phone Number:

E-Mail Address:

Receiving Brokerage agrees to pay Originating Brokerage a referral fee of ____ (%) [of the ____ listing ____ buying ____ both] commission paid to their Brokerage OR U.S. \$ _____ at the close of escrow. Said commission is to be payable in U.S. dollars. Referral fee shall be paid to Originating Brokerage within ____ calendar days of commission being received by the Receiving Brokerage.

Additional Terms :



INBOUND - INTERNATIONAL REFERRAL AGREEMENT (continued)

This Referral Agreement is valid for _____ transaction(s) with Client placed under contract during the period defined below.

The Receiving Agent agrees to notify the Originating Agent of client entering into contract within five (5) days of contract acceptance and estimated closing date.

Currency. Unless otherwise specified in this Agreement, all reference to currency, monetary values and dollars set forth herein shall mean United States (U.S.) dollars and all payments hereunder shall be made in United States dollars.

This Referral Agreement will begin on _____ and Expire on _____.

Signatures:

Originating Agent: _____ Date: _____

Originating Managing Broker: _____ Date: _____

Receiving Agent: _____ Date: _____

Receiving Managing Broker: _____ Date: _____

PAYMENT TO EXP REALTY INSTRUCTIONS
(eXp is NOT set up for outgoing wire transfers at the present time)

Make all checks payable to: eXp Realty LLC | Tax ID# 20-8369429 (W9 Attached). Please include a copy of this agreement with payment. Email a copy of check to the eXp Agent.

MAIL TO:

eXp Realty, LLC
2219 Rimland Drive, Suite 301
Bellingham, WA 98226

**FOR WIRE REQUESTS, PLEASE CONTACT THE TRANSACTION PROCESSING DEPARTMENT
FOR A COPY OF OUR WIRING INSTRUCTIONS.**