



Resort Properties of the Pacific,

Suite 206,207 Princeville Center, Princeville, HI 96722 Phone 808-826-4280 Fax: 808-748-0800

Real Estate Agent Referral Form

Receiving Agent:

Agent Name _____
Office Name _____
Address _____ City _____
State/Prov _____ Zip/PC _____ Country _____
Email Address _____
Primary Phone _____ Cell Phone _____ Fax _____

Referral Agent:

Agent Name _____
Office Name _____
Address _____ City _____
State/Prov _____ Zip/PC _____ Country _____
Email Address _____
Primary Phone _____ Cell Phone _____ Fax _____

Client :

Name _____
Current Address _____
City _____
State/Prov _____ Zip/PC _____ Country _____
Additional Information _____

Home Phone Number _____ Work Phone Number _____
Cell Phone Number _____
Email Address _____
Expected Moving Date _____
Client is a *buyer/seller* _____
Estimated Property Listing Price _____

Buyer:

Client Pre-Qualified _____ Lender _____
Price Range _____ Estimated Down Payment _____
Preferred Style: Single Family _____ Condo/Town Home _____ Other _____
Number of Bedrooms _____ Number of Baths _____ Square Footage _____
Preferred Areas _____
Additional Requirements _____

An agreed upon referral fee of _____ of the total commission payable to receiving agent shall be paid to Resort Properties of the Pacific at the time of closing from escrow proceeds. Any modifications to this agreement must be in writing and signed by all parties. Referral payments are to be noted on Resort Properties Escrow Instruction Form

The referral fee will be based on: Listing _____ Selling _____ Commission

Referring Agent Signature _____ Date _____

Referring Broker Signature _____ Date _____

Receiving Agent Signature _____ Date _____

Receiving Broker Signature _____ Date _____