



**INCOMING REFERRAL AGREEMENT**

eXp AGENT RECEIVING REFERRAL: \_\_\_\_\_

eXp AGENT ADDRESS: \_\_\_\_\_

eXp AGENT OFFICE PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

AGENT'S COMPANY SENDING REFERRAL: \_\_\_\_\_

AGENT NAME SENDING REFERRAL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

OFFICE PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Tax ID #: \_\_\_\_\_ Broker's License #: \_\_\_\_\_

A completed W9 is required prior to paying any referral fees

\_\_\_ Client is looking to BUY      OR      \_\_\_ Client is looking to SELL

Client(s) Name: \_\_\_\_\_

Client(s) Address: \_\_\_\_\_

Client(s) Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Misc. Information: \_\_\_\_\_

\_\_\_\_\_

eXp Realty agrees to pay Sending Company a referral fee of \_\_\_\_\_ ( % or amount) of the commission paid to eXp Realty, LLC at the close of escrow.

\_\_\_\_\_  
Sending Agent Signature

\_\_\_\_\_  
Date

*APPROVED BY eXp Realty*

\_\_\_\_\_  
eXp Agent Signature / Company Name

\_\_\_\_\_  
Date

