



# BROKER TO BROKER REFERRAL AGREEMENT

## ORIGINATING BROKER INFORMATION

Premier Referral Network  
 8290 W. Sahara Avenue, Suite 200  
 Las Vegas, NV 89117  
 Broker: Annie Manderscheid  
 NV License: B.0143299.CORP  
 Email: annie.manderscheid@prnv.com  
 Phone: 702-939-5112  
 Signature: \_\_\_\_\_

Date Sent: \_\_\_\_\_  
 PRN Sales Associate: \_\_\_\_\_  
 Real Estate License #: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Signature: \_\_\_\_\_

## RECEIVING BROKER INFORMATION

Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Broker Name: \_\_\_\_\_  
 Real Estate License #: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Signature: \_\_\_\_\_

Date Received: \_\_\_\_\_  
 Sales Associate: \_\_\_\_\_  
 Real Estate License #: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Signature: \_\_\_\_\_

Within fourteen (14) days of receipt of commission and/or fee, Receiving Broker agrees to pay Originating Broker

a referral fee of the  Seller/Landlord side  Buyer/Tenant side of the transaction as follows:

\_\_\_\_\_ % of total sales price      \_\_\_\_\_ % of total sales volume      \_\_\_\_\_ % of total lease volume  
 \_\_\_\_\_ % of gross commission, with no offset, based on the total sales price, sales volume or lease volume

## REFERRED CUSTOMER INFORMATION

Is this customer aware of being referred?      \_\_\_\_\_ YES      \_\_\_\_\_ NO

Company Name: \_\_\_\_\_      Contact Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_      Email: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_      Phone: \_\_\_\_\_  
 Additional Information/Special Instructions: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Referred Customer shall remain the customer of Originating Broker. In the event Referred Customer desires to transact additional real estate business (residential or commercial), Receiving Broker herein agrees to refer Referred Customer back to Originating Broker.

## PROPERTY / PROJECT INFORMATION

Service Type, choose one option only:  
 Sale       Sale/Leaseback       Appraisal/Valuation       Property Management  
 Purchase       Lease       Consulting       Construction/Development  
 Other (specify) \_\_\_\_\_

Property Type, choose one option only:  
 Residential       Land       Office       Retail  
 Industrial       Multifamily       Hotel/Leisure       Flex  
 Other (specify) \_\_\_\_\_

Property/Project Name: \_\_\_\_\_ APN: \_\_\_\_\_  
 Property Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_  
 Estimated Size of Deal: \_\_\_\_\_ Number of Units \_\_\_\_\_