## Ohio Sheriff Sales, LLC BUYER BROKER REGISTRATION FORM

## Print this form and fax to 1.877.772.4217 or email to timlileauctioneer@gmail.com

Broker/Salesperson:		Agency:	
Address:			
Real Estate License Number			
As a licensed real estate E	Broker/Salesper	rson, I wish to register the following clie	nt:
Name:			
Address:			
Phone:	Email:		
For the upcon	iing auction of	the following subject property:	
205 N. Ple	asant St., (	Georgtown, Ohio 45121	
		(10% will be added	to this figure)*
I understand and acknowledge:  1) That my compensation will be based on 3% beyond this opening bid should my client be the		PENING BID recorded above PLUS 1% of any a pay for and close on the transaction.	auction day advance
2) That I am required to either conduct a showing whichever is available.	g of the subject pro	perty for my client or accompany them to a schedu	ıled open inspection
3) I must accompany my client to the auction un online.	less bidding onlin	e. If bidding online, I must register my client prio	r to their registering
4) Registration must take place a minimum of 4	8 hours prior to th	ne scheduled auction time (no exceptions).	
5) No oral registrations will be accepted.			
Sales LLC, and the Seller from any and all clai actions or inactions or representations made by	ms, costs or exper me or in connection in contact with C	Ohio Real Estate Auctions LLC or the Seller cor	may arise out of any
THERE WILL BE NO EX	KCEPTIONS T	TO THESE BROKER REQUIREMEN	ITS.
In addition to my signature below, pleas understand and acknowledge acceptance	_	ature of my client, indicating that they ha	ve read,
Broker or Salesperson Signature	Date	Client or Buyer Signature	Date
Authorized Auctioneer Acknowledgmei	nt Date	SHERIEF	