Ohio Real Estate Auctions, LLC BUYER BROKER REGISTRATION FORM

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

Broker/Salesperson:		Agency:	
		son, I wish to register the following cl	
Name:	-		
		ion of the following subject property:	
	633 Florence Ave.,	Sabina, Ohio 45169	
I understand and acknowledge: 1) That my compensation will be based of close on the transaction.	on 1% of my client's *Wl	INNING BID should my client be the successf	ul bidder, pay for and
2) That I am required to accompany my	client to a scheduled open	inspection or conduct a private showing of the	subject property.
3) I must register my client prior to their	registering online.		
4) Registration must take place a minimu	um of 48 hours prior to th	e scheduled auction end time (no exceptions).	
5) No oral registrations will be accepted.			
Estate Auctions LLC, and the Seller from out of any actions or inactions or represe	m any and all claims, cosmotations made by me or in y been in contact with O	ter, I shall hold harmless and indemnify the A ts or expenses, including reasonable attorney's a connection with the sale of this property. hio Real Estate Auctions, LLC or the Seller coson.	fee, which may arise
THERE WILL BE 1	NO EXCEPTIONS T	TO THESE BROKER REQUIREME	NTS.
In addition to my signature below, understand and acknowledge acce	, 1	ture of my client, indicating that they h	ave read,
Broker or Salesperson Signature	Date	Client or Buyer Signature	Date
Authorized Auctioneer Acknowled	dgment Date	Ohio Para I Francis Ann	
		OhioRealEstateAuc	uons