AREA GROUP, LLC BUYER BROKER REGISTRATION FORM

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

Broker/Salesperson:		Agency:	
Real Estate License Number			
		erson, I wish to register the following cli	
	-		
Address:			
		•	
		ction of the following subject property:	
	1303 Main Stree	t, Greenup, KY 41144	
I understand and acknowledge: 1) That my compensation will be based close on the transaction.	on 1% of my client's *\	WINNING BID should my client be the successfu	ıl bidder, pay for and
2) That I am required to accompany my	client to a scheduled gu	ided tour of the subject property.	
3) I must register my client prior to their			
, ·	-	the scheduled auction end time (no exceptions).	
5) No oral registrations will be accepted			
LLC and the Seller from any and all cla or inactions or representations made by	mims, costs or expenses, in me or in connection with by been in contact with A	her, I shall hold harmless and indemnify the Auc including reasonable attorney's fee, which may ari that the sale of this property. The Area Group, LLC or the Seller concerning the subj	se out of any actions
THERE WILL BE	NO EXCEPTIONS	TO THESE BROKER REQUIREMEN	NTS.
In addition to my signature below understand and acknowledge account	, ,	nature of my client, indicating that they have.	ive read,
Broker or Salesperson Signature	Date	Client or Buyer Signature	Date
Authorized Auctioneer Acknowle	edgment Date		
		Area Group, I	nc.