## 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:
Address:	
Phone:	
Real Estate License Numb	r
	al estate Broker/Salesperson, I wish to register the following client:
Name:	
Address:	
Phone:	Email:

For the upcoming online-only auction of the following subject property:

## 11053 Main Street, Sharonville, Ohio 45241

## I understand and acknowledge:

1) That my compensation will be based on 1% of my client's **\*WINNING BID** should my client be the successful bidder, pay for and close on the transaction.

2) That I am required to accompany my client to a scheduled guided tour of the subject property.

3) I must register my client prior to their registering online.

4) Registration must take place a minimum of **48 hours** prior to the scheduled auction end time (no exceptions).

5) No oral registrations will be accepted.

I am representing my client as Buyer, and not the Seller. Further, I shall hold harmless and indemnify the Auctioneer, Ohio Real Estate Auctions LLC, and the Seller from any and all claims, costs or expenses, including reasonable attorney's fee, which may arise out of any actions or inactions or representations made by me or in connection with the sale of this property.

A prospective bidder that has previously been in contact with Ohio Real Estate Auctions LLC or the Seller concerning the subject property will not be eligible as a client for any Broker or Salesperson.

## THERE WILL BE NO EXCEPTIONS TO THESE BROKER REQUIREMENTS.

In addition to my signature below, please find the signature of my client, indicating that they have read, understand and acknowledge acceptance of the above.

Broker or Salesperson Signature	Date	Client or Buyer Signature	Date
Authorized Auctioneer Acknowledgment	Date	<b>OhioRealEstateAuctions</b>	