

## REFERRAL FORM

DATE: \_\_\_\_\_

TO: \_\_\_\_\_  
OFFICE NAME AGENT NAME

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

This is to confirm our telephone conversation regarding the referral of our customer(s):

NAME: \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Should a sale be consummated with the above customer(s), it is mutually agreed that our office will receive a referral fee of \_\_\_\_\_ of the sale commission received by your office.

Thank you,

\_\_\_\_\_  
VRI REALTORS  
BETTER HOMES NJ.COM  
REFERRING AGENT

TAX ID# 222379170

Please sign below as an acknowledgment and return one copy to our office. Thanking you in advance for your cooperation.

\_\_\_\_\_  
Name Company Date

Regional Marketing Centers

MIDDLETOWN OFFICE  
1670 Hwy. 35  
Middletown, NJ 07748  
(732) 957-0300  
(732) 957-0177 Fax

KEYPORT OFFICE  
55 West Front Street  
Keyport, NJ 07735  
(732) 264-9593  
(732) 264-2174 Fax

HAZLET OFFICE  
3400 Highway 35  
Executive Plaza, Suite 5  
Hazlet, NJ 07730  
(732) 264-9511  
(732) 739-8675 Fax

SEA BRIGHT OFFICE  
1076 Ocean Avenue  
Sea Bright, NJ 07760  
(732) 530-1900  
(732) 747-5307 Fax

BRICK OFFICE  
35 Beaverson Blvd.  
Brick, NJ 08723  
(732) 920-6333  
(732) 477-5596 Fax

COLONIA OFFICE  
576 Inman Avenue  
Colonia, NJ 07067  
732-396-8000  
Fax 732-396-1538