Listing Package

Better Mand Gardens.

ALLIANCE

This form must be completed in its entirety.

Transaction Information

Location D BHGRE Alliance East D Property Address	BHGRE Alliance West	Agent Name	
House Number	Directional Street Name		Suffix
 City	•	 Zip Code	MLS Number
Status Listing Expired / Withdrawn		Zip Code	
(not a Paperless Pipeline field)	e 🔲 Client Referral 🔲 Syr Sign Call 🔲 Cartus 🔲 Ot		
			ial Lease Grief FSBO HUD Land Lease Transaction Broker USAA / Navy Federal
	Buyer, Selle	er, Pricing, etc.	
More Info	Listing Date		Commission summary
Source of Business	/ /	_/	Commission%
Year Built			Referral? Yes No
County///		Split% (to BHGRE Alliance Agent)	
Financing Type	Jener Hamers		Brokerage giving referral
Title Company BHGRE Alliance Lock Box?			Agent giving referral
Box #			
Shackle #	List Price		Brokerage accepting referral
CBS #			
	\$,, es □No T.LC		Agent accepting referral
Sign #	Total Commissio		Molling oddroop for referral
Office Number	\$,		Mailing address for referral
			This transaction has outside
			(co-op) agents
			Outside Agent Name / Info
			 Email
Traditional Required Documents			Referral, when applicable
 BRRETA CMA County Tax Records; with client signature(s) and date LBP (If Applicable) 			Referral Agreement
			 Settlement Statement W9 for Other Company
Listing Agreement			
Listing Agreement Amendment			
 Listing Agreement Amendment MLS Listing; with client signatur 		vppiicable)	
 PCR (If Applicable) 			
Seller's Net Estimate			