



GREATER
ORLANDO
REALTY

3RD PARTY REFERRAL

Date: _____ Referral of Listing for **Sale** _____ or for **Rent**: _____

Referring Agent/Broker	
Broker Name:	Agent Name:
Company:	
Broker ID#:	
Email:	Email:
Phone:	Phone:

Owner Information	
Name:	Phone:
Address:	
Rental Address:	

Tenant Information	
Tenant Name:	
Address:	
Email:	
Phone:	

Payment Process

After a tenant has taken occupancy of the property and Greater Orlando Realty, LLC has received the first month's rent, referral fees shall be paid on the 15th of the following month. For example, if the referred party takes occupancy on the 5th of January, the referral fee will be paid on the 15th of February.

Check shall be made payable to the broker of record, for whom a Tax ID number must be given prior to disbursement of referral fee.

Should you have any questions, please contact Rafael Salado at 407-339-1277 or via email to Rafael@GreaterOrlandoCompanies.com.

Acknowledgement

By my signature below, I acknowledge that Greater Orlando Realty, LLC is the authorized representative for the Owner/Landlord and that leasing agent's fees will be paid by the Owner/Landlord.

Further, I acknowledge that I received this written notice prior the execution of a Lease Agreement.

“BROKER”

“AGENT”

Printed Name

Printed Name

Signature

Signature

Date

Date