

HIGHLIGHT



REALTY



AGENT COMMISSION AGREEMENT

6679 Lake Worth Rd.
Lake Worth FL .33467
Tel: 561-641-6787
Fax: 561-969-6220

DATE		
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Agent Name :	Office:
Phone #	Email
SS#	

HOME ADDRESS _____
CITY _____ ST _____ ZIP _____

PLAN _____
COMMISSION SPLIT % _____ FOR AGENT
TRANSACTION FEE SALE \$ _____
TRANSACTION FEE RENTAL \$ _____
ERRORS AND OMISSIONS \$ _____
MONTHLY FEE \$ _____
REFERRED BY _____

WE DO HAVE A ESCROW ACCOUNT FOR DEPOSITS ,WE NEVER HOLD MORE THAN 1% OF ANY SALE AMOUNT .WE DO RECOMMEND THAT YOU DEPOSIT ESCROW CHECK WITH TITLE COMPANIES
E S C R O W C H E C K S M U S T B E T U R N E D I N W I T H I N 2 4 H R S .
WE CARRY ERRORS AND OMISSIONS INSURANCE , IN CASE OF A CLAIM YOU ARE RESPONSIBLE FOR DEDUCTIBLE AND IF FOR ANY REASON ,THE POLICY IS NOT ACTIVE ,YOU WILL BE RESPONSIBLE FOR ALL CLAIMS (We recommend everybody to have a personal errors and omissions policy .)
We only use FAR BAR forms

If you need a different form contact broker
all approved forms are on the web site .

AGENT SIGNATURE _____

As always , we appreciate you loyalty to our company .

We will always beat any other companies commission agreement
if you think someone else has a better deal let us know ,and we will beat them

Sincerely ,
Highlight Realty