

## **TENANT REFERRAL AGREEMENT**

(For Tenant referrals only)

Agent Sending Referral Infor	<u>mation</u>	
Agent Name:	Office Name:	
Address:		
City:	State:	Zip:
Email:	Office Phone:	
Cell:	Fax:	
<u>Tenant Information</u> (Please	provide as much information about the owne	er as possible.)
Name(s):		
Greene Realty Property Tenant is Into	erested:	
City:	, FL Zip:	
Tenant Requires:		
City/Location:		
Beds: Sq. ft.: _	Garage: Additional Features:	
Special Notes on Tenant:		
Tenant Home Phone:	Tenant Work Phone	e:
Tenant Cell Phone:	Owner's Email Address:	
Referral Agreement Terms		
approved, and who rents a home marent. Multiple Tenants who enter a	eferral, Greene Realty will pay a referral fee of \$1 anaged by Greene Realty. The referral fee will b a single lease to rent a single unit shall earn a sing referral fee outlined herein shall be paid to the b	e paid upon receipt of the first collected gle referral fee. Greene Realty reserves the
Referring Agent/Broker		Date:
Greene Realty Agent/Broker		Date:
*For Greene Realty use only: Paymen	nt Amount:Sent Date:	·