SAVINA

DOWNTOWN SAN DIEGO

SAVINA BROKER CLIENT REGISTRATION FORM

Client Information

First Name _____

Last Name _____

Company Name _____

Street _____

City _____

State _____

ZIP/Postal _____

Email _____

Phone _____

Broker/Agent Information

Agent First _____

Agent Last _____

Brokerage Legal Name _____

Office Street _____

City _____

State _____

ZIP/Postal _____

Email _____

Phone _____

License # _____

CLIENTS ACCOMPANIED BY AGENTS/BROKERS:
If your name was registered with Savina prior to engaging Savina directly, that Broker may be eligible for a commission fee subject to the terms of the Savina Broker Commission Agreement ("Agreement"). To be eligible, the Broker needs to complete the information set forth above, execute the Agreement and meet the requirements of the terms of the Agreement. This registration is valid for 120 days from the date signed below. In the event the Client's purchase occurs after this registration expires, no commission shall be paid to the Broker. Upon expiration of this registration, Broker may register Client for another 90 day period.

BROKER/AGENTS STATEMENT:
I have registered the prospective purchaser named on this registration card prior to them engaging Savina. I understand that I will be entitled to a commission fee only if the requirements of the Savina Broker Commission Agreement ("Agreement") are met. I recognize the Agreement must be executed by both the Broker and an authorized representative of the Seller to be effective. I represent that I am licensed as a Real Estate Broker or Salesperson under the laws of the State in which this community is located.

Client Signature _____

Date _____

Broker/Agent Signature _____

Date _____

☐ By checking this box the broker also acknowledges receiving and accepting Savina Broker Policies

_____
Date Received by Savina
S&P Realty Services Corp
CalBRE: 02012517