CRG
Capital Recovery Group, LLC

auctioneers
appraisers
advisors

BUYER'S BROKER REGISTRATION FORM

BROKER/SALESPERSON _____

AGENCY _____

ADDRESS _____

TELEPHONE _____ FAX _____

Dear Capital Recovery Group, LLC,

As a licensed real estate broker/salesperson, I, _____

_____, License Number _____
(attach copy of Real Estate License)

wish to register my client:

NAME _____

ADDRESS _____

TELEPHONE _____

For the upcoming auction of the following property _____

I shall attend a scheduled preview, if any, and the auction, along with my client who will register to bid on the day of auction. It is my understanding that a fee will be paid to the above listed real estate agency should my client be the successful bidder, pays for and closes on the property, and I have registered them at least 48 hours prior to the day of auction. No oral registrations will be accepted. (Please note that principals are excluded from this program.)

I am representing my client, the buyer, and not the seller. Further, I shall hold harmless and indemnify Capital Recovery Group, LLC and the seller from any and all claims, costs or expenses, including reasonable attorney's fees, which my arise out of any actions or inactions or representations made by me in connection with the sale of this property.

If the client has been in contact with a representative from Capital Recovery Group, LLC in regards to this auction, is a part of our client mailing, or received a flyer from Capital Recovery Group, the Broker/Realtor will not qualify for a participation fee.

There will be no exceptions to these broker requirements.

In addition to my signature below, please find the signature of my client, indicating they have seen and agreed to the above.

_____ _____
WITNESS BROKER/SALESPERSON DATE

_____ _____
WITNESS CLIENT DATE

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