

eCommission Broker Sign Up Sheet

To begin offering eCommission at your Company, please complete this form, and fax it toll free to 877-882-6960. We will call you when your account set-up is completed.

Company Name: _____

Of Office Locations: _____ **# Of Sales Associates:** _____

Address: _____
Street City State Zip Code

Telephone Number: _____ **Fax Number:** _____

Broker Name: _____

Broker's Email Address: _____

What is the name of the person in your office who opens files on each sales contract?

Name Email:

Authorized Signatures

You, or a person you designate from your company, will be asked to authorize each eCommission Agreement. Please provide us with signature samples: (It is best to have at least two signing authorities, in case one person is away when an eCommission is requested).

Print Name: _____ **Title:** _____

Signature: _____

Print Name: _____ **Title:** _____

Signature: _____

Payment Method

There are two ways to receive eCommission payments. Please indicate your preference:

- Pay eCommission directly to Sales Associate**
- Pay eCommission directly to Broker**

If payments are to be made directly to Broker, please indicate your preference:

- Check Form – Sent by overnight courier**
- Wire transfer of funds – (please include a copy of a voided company check)**

Re-Payment Method

eCommission is repaid at closing through one of two methods: Please indicate your preference:

- Redirection of funds through the title/escrow company or closing attorney.**
- An invoice, sent to your Office requesting payment.**