

INDEPENDENT AGENT to OWNER/IA REFERRAL for RENTALS (IORR)

INDEPENDENT AGENT (IA): A person who works for the Owner or Company who is not required to be a RED member. (NRS645.240)

OWNER: A person that owns the property who chooses to manage the property himself/herself.

INDEPENDENT AGENT (IA): A person who works for the Owner or Company who is not required to be a RED member. (NRS645.240)

**PARTY-1 [REFERRING AGENT]
[INDEPENDENT AGENT (IA)]**

Independent Agent Name _____

Independent Agent Address _____

Independent Agent City, State, Zip code _____

Independent Agent Phone _____ Independent Agent Fax _____

Independent Agent Email _____

PARTY-2 [OWNER/INDEPENDENT AGENT]

Owner/Independent Agent Name _____

Owner/Independent Agent Address _____

Owner/Independent Agent City, State, Zip code _____

Owner/Independent Agent Phone _____ Owner/Independent Agent Fax _____

Owner/Independent Agent Email _____

PARTY-3 [APPLICANT-1]

Applicant Name _____

Applicant Phone _____ Applicant Fax _____

Applicant Email _____

Applicant ID / DL# _____ ID / DL State _____

PARTY-3 [APPLICANT-2]

Applicant Name _____

Applicant Phone _____ Applicant Fax _____

Applicant Email _____

Applicant ID / DL# _____ ID / DL State _____

PREMISE:

Rental Property Address, City, State, Zip code _____ < OR > _____
NO Gate Gate Code

Indicate the Advertised Referral Fee \$ _____ MLS/Listing# _____

Party-1 [Referring Agent] by signing certifies that the Premise was physically shown to Party-3 [Applicant-1/-2].

❖ Submit Party-1 DL and W-9 to Party-2.

X _____
Signature [Referring Agent] Date

Party-3 [Applicant-1] by signing certifies that ONLY Party-1 [Referring Agent] showed him/her the Premise.

X _____
Signature [Applicant-1] Date

Party-3 [Applicant-2] by signing certifies that ONLY Party-1 [Referring Agent] showed him/her the Premise.

X _____
Signature [Applicant-2] Date

Party-2 [Owner/Independent Agent] will complete this section after successful completion of a fully executed lease.

❖ Submission of a rental application does NOT entitle Party-1 [Referring Agent] to any referral fee.

Referral Fee Paid \$ _____

Payment Type (choose one):

- CK# _____
- MO# _____
- Cashiers CK# _____
- Cash. Party-1 MUST give Party-2 a receipt.

Payment Delivered By (choose one):

- USPS Mail to Party-1. Date Mailed: _____
- Party-1 physically picked up payment.
 ❖ MUST obtain a COLOR copy of Party-1's ID / DL.

X _____
Signature Party-1 [Referring Agent] Date