



Of Central Virginia and Hampton Roads

Central Virginia
Phone: (804) 427-5800 Fax: (804) 427-5799
Hampton Roads
Phone: (757) 473-5500 Fax: (757) 216-5800

APPLICATION to SELL RECEIVABLE

(Please TYPE or PRINT clearly)

1. Agent Name: SS# Listing Agent
Home Address: Home Phone: Selling Agent
City, State, Zip: Home Fax: Own Home Rent Home

2. Company Name: Broker/Auth. Rep.
Company Address: Company Phone:
City, State, Zip: Company Fax:

3. E-Mail: Bank (Personal):
Cell Phone: Account #:
Year Licensed: Years with Present Company:

4. Property Address: Seller:
City, State, Zip: Purchaser:

5. Settlement Agent: Settlement Rep.:
Settlement Address: Settlement Phone:
City, State, Zip: Settlement Fax:
Escrow Number: Settlement Rep Email:

6. Lender: Loan Officer:
Lender Address: Lender Phone:
City, State, Zip: Lender Fax:

7. Final Contract Price: New Construction? Yes No

8. Ratification Date: Close or Escrow Date:
(Date that ALL contingencies except Financing have been removed.)

9. Receivable (Agent's Share of Commission) \$ Do you want to sell your entire Receivable or just part of it?
(After ALL expenses and deductions, NET amount due to you.) Entire Partial \$

10. Documents Required: X Certification
X MLS Listing Printout (Status: Under Contract / Pending / Sold)
X Notice of Assignment (Acknowledged by or letter from Settlement Agent)

FAX the completed Application together with the X'd items to (804) 427-5799 for Central Virginia or (757) 473-5500 for Hampton Roads
Do not FAX separately.

Certification: I certify under penalty of perjury and of obtaining money under false pretenses that the information provided in this Application is true and correct as of the date set forth opposite my signature on this Application and acknowledge my understanding that any intentional or negligent misrepresentation of the information contained in this Application may result in civil liability and/or criminal penalties and liability for monetary damages to Commission Express, its agents, successors and assigns, insurers and any other person who may suffer any loss due to reliance upon any misrepresentation which I have made on this Application.

Date X Seal (Agent)