



INSTRUCTIONS FOR COMMISSION TO BE PAID AT CLOSING

(To be paid at closing, completed form must be submitted for signature 3 business days prior to closing)

DATE: _____

Closing Date: _____ Name of Closing Attorney: _____

Closing Office Phone: _____ Closing Office Email: _____

Property Address: _____

Sales Price: \$_____ Commission is Based on a Sales Price of: \$_____

Broker Total Commission Due to RE/MAX Center: \$_____

Less Office/FMLS Fees Owed to RE/MAX Center: \$_____ Less Referral Commission: \$_____

Referral Tax ID #: _____ Name & Address: _____

***IF THESE NUMBERS CHANGE DO NOT DISBURSE PER THESE INSTRUCTIONS,
PLEASE CONTACT RALUCA LARMOUR, CLOSING SPECIALIST AT 678-804-2727***

Make one check payable to RE/MAX Center for: \$_____

Make one check payable to our Agent, _____, for \$_____

NOTE: Agent cannot change this amount. Please mail this check to the address below along with a signed ALTA Form.

RE/MAX Center is holding \$_____ in earnest money that our Agent will bring to the closing table.

Please email RE/MAX Center a copy of the final ALTA form immediately after closing.

Thank you,

Approved By: _____ **Date:** _____

RE/MAX Center
1140 Old Peachtree Road, Suite D
Duluth, GA 30097

Phone: 770-932-1234

Email: closings@remaxcenter.appfiles.com

*****BROKER WILL NOT SIGN PAID AT CLOSING FORM UNLESS ALL PAPERWORK IS COMPLETE*****