



OUR *Passion* YOUR *Home*



**FLAT FEE OF \$20,000 PAID TO ALL LICENSED REAL ESTATE AGENTS ON ALL SINGLE DETACHED LOTS**

**REFERRING AGENT INFORMATION:**

Real Estate Company Name: \_\_\_\_\_ Agent Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Email: \_\_\_\_\_ Cell#: \_\_\_\_\_

**REFERRED CLIENT INFORMATION:**

Client Name: \_\_\_\_\_ Cell#: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Email: \_\_\_\_\_

**ROSEHAVEN PURCHASE DETAILS:**

Community Name: Ivy Rouge - PH5 Location: Oakville, ON

Lot # & Street Name: \_\_\_\_\_ Model Name & Elev.: \_\_\_\_\_

Final Accepted Purchase Price: \_\_\_\_\_ Scheduled Closing Date: \_\_\_\_\_

**Client Referred:** \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**Referring Agent:** \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**Rosehaven Representative:** \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**Rosehaven Homes A.S.O.:** \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**IMPORTANT NOTES:**

1. Referral Fee Payable is based on a percentage of the purchase price (NET of HST).
2. It is agreed the Vendor shall pay the above referral fee directly to Spectrum Realty Services Inc., Brokerage shall disburse said monies as soon as possible after receiving said sum from the Vendor.
3. The Fee is payable to the Referring Agent Brokerage upon Successful Completion of the transaction, within sixty days following the closing date, provided that Spectrum Realty Services Inc. Brokerage has received the funds.
4. Referring Real Estate Agent must personally introduce their client(s) to the Rosehaven Sales Representative and complete this form at the time of introduction, and attach to agreement.
5. Any Real Estate Agent's client who have already registered at the Rosehaven Presentation Centre listed above prior to this introduction are not eligible for a referral.
6. The referral fee cannot be combined with any other "referral program," offered (i.e. Loyalty Program).



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**FLAT FEE OF \$15,000 PAID TO ALL LICENSED REAL ESTATE AGENTS ON ALL TOWNS AND SEMI DETACHED LOTS**

**REFERRING AGENT INFORMATION:**

Real Estate Company Name: \_\_\_\_\_ Agent Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell#: \_\_\_\_\_

**REFERRED CLIENT INFORMATION:**

Client Name: \_\_\_\_\_ Cell#: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Email: \_\_\_\_\_

**ROSEHAVEN PURCHASE DETAILS:**

Community Name: **Ivy Rouge - PH5** Location: **Oakville, ON**  
Lot # & Street Name: \_\_\_\_\_ Model Name & Elev.: \_\_\_\_\_  
Final Accepted Purchase Price: \_\_\_\_\_ Scheduled Closing Date: \_\_\_\_\_

**Client Referred:** \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
**Referring Agent:** \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
**Rosehaven Representative:** \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
**Rosehaven Homes A.S.O.:** \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**IMPORTANT NOTES:**

1. Referral Fee Payable is based on a percentage of the purchase price (NET of HST).
2. It is agreed the Vendor shall pay the above referral fee directly to Spectrum Realty Services Inc., Brokerage shall disburse said monies as soon as possible after receiving said sum from the Vendor.
3. The Fee is payable to the Referring Agent Brokerage upon Successful Completion of the transaction, within sixty days following the closing date, provided that Spectrum Realty Services Inc. Brokerage has received the funds.
4. Referring Real Estate Agent must personally introduce their client(s) to the Rosehaven Sales Representative and complete this form at the time of introduction, and attach to agreement.
5. Any Real Estate Agent's client who have already registered at the Rosehaven Presentation Centre listed above prior to this introduction are not eligible for a referral.
6. The referral fee cannot be combined with any other "referral program," offered (i.e. Loyalty Program).