

# TransactionCoordinating.com

## Deal Cover Sheet

Client Name: \_\_\_\_\_

Agent: \_\_\_\_\_ %

Co-Agent: \_\_\_\_\_ %

Mutual Acceptance Date: \_\_\_\_\_

Will signs need to be removed after Closing?  YES  NO

Commission Percentage:  3%  3%, 1.5%  3.5, 1.75% Other: \_\_\_\_\_

Referral / Relocation?	Mortgage Information
Name: _____	Mort. Co: _____
Company: _____	Loan Officer: _____
Address: _____	Phone: _____
City/State: _____	
% / Amount: _____	

Additional Information:

---

---

Your Transaction Coordinating charge:	
<b>Setup with Escrow Partners</b> <input type="checkbox"/> <b>\$99</b>	<b>Setup with Other Escrow</b> <input type="checkbox"/> <b>\$175</b>
<b>Customer Dashboard?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	

Please FAX this cover sheet with the PS Agreement to

**FAX: 425-732-4851**