kw GOLD COAST
KELLERWILLIAMS. REALTY

IN-HOUSE COMMISSION SPLIT AGREEMENT

Date: _____

Referral/Participation Split For: ☐ **Listing** ☐ **Buyer** ☐ **Tenant**

Client / Customer: **(circle one)**

Name: _____

Address: _____

Phone: _____

Email: _____

Property Address: _____

ORIGINATING AGENT NAME: _____ **DEAL SPLIT %:** _____ **or**
Compensation Amount $ _____

Title: _____

RECEIVING AGENT NAME: _____ **DEAL SPLIT %:** _____ **or**
Compensation Amount $ _____

Title: _____

_____

Signature - Originating Agent **Date**

_____

Signature - Receiving Agent **Date**

_____

Signature - Broker of Record **Date**