



Agents Advance Inc.
1701 N Greenville Ave. Ste 1000
Richardson, TX 75081
972-761-0000 (Phone)
972-761-0007 (Fax)
1-888-3AGENT3 (Toll Free)
www.AgentsAdvancelnc.com

Commission Advance Request (Page 1 of 2)
Please Print or Type

Date: _____

I would like an advance in the amount of \$_____ from my earned commission on the sale described below. I understand that your fee will be deducted from this amount

Applicant Data

Name _____

Residence Address: _____

City, State, Zip Code _____

Years at Current Address _____

Own or Rent _____

Residence Phone _____

Residence Fax _____

Social Security Number _____

Cellular Phone _____

E-Mail Address _____

Drivers License Number _____

First Year of Real Estate License _____

Date Joined Current Broker (Mo & Yr) _____

Real Estate License Number _____

Date of Birth (Do Not Include Year) _____

Have You Ever Declared Bankruptcy? _____ **When?** _____

Have You Had Any Liens or Judgments Filed Against You? _____

Number of Closings in the Last 12 Months? _____

Commission Advance Request (Page 2 of 2)

Contract Data

Property Address

City, State, Zip Code

Mortgage Company Name

Address

City, State, Zip Code

Phone Number

Escrow Company Name *

Address

City, State, Zip Code

Contact Name

Phone Number

Fax Number

Escrow/File Number

←←←←←

* Or Title Company, Closing Attorney, Funding Agent

Applicant's Earned Commission

Advance Requested

Closing Date

Sales Price

Buyer Name

Seller Name

Realtor Signature

Date

I was referred to Agents Advance by

Broker Data

Office Name & Address

Phone

Fax

I certify that the above described property is scheduled to close on the above date, no "Option Period" for cancellation of the contract exists, the realtor is entitled to the earned commission and that the realtor has not taken an advance on the above property with another commission advance company.

- I prefer that the Realtor's advance be:
- Deposited directly into the Realtor's bank account.
 - Paid by check directly to the Realtor.
 - Paid by check to Broker Office Name **AND** the Realtor
 - Paid by check to Broker Office Name **ONLY**.

Broker in Charge Signature

Date

Complete and Return to Agents Advance Inc. at Fax No. 972-761-0007