



**REFERRAL FEE REQUEST**

Today's Date: \_\_\_\_\_  
Refer Name: \_\_\_\_\_  
Borrower Name: \_\_\_\_\_  
Closing Date: \_\_\_\_\_  
Final Loan Amount: \_\_\_\_\_  
Referral Fee %: \_\_\_\_\_% - must match Fee Agreement  
Referral Fee Amount: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

---

**IMPORTANT NOTICE: You are responsible for all payment of your taxes including Federal, State, Local, School or any other tax that may be applicable.**

Note: Alliance typically pays referral fees within 24 - 48 hours of receiving closing funds. A Loan must have been disbursed from the Lender before Alliance can issue a referral fee.

---

**For Alliance Office Use Only:**

Date Consultant Paid: _____	Date Alliance Rec'd Proceeds: _____
Amount of Contractor Check: \$_____	Check #: _____
Alliance Broker Fee: \$_____	Alliance Other Fees: \$_____
<b>Total Net Fees earned by Alliance: \$_____</b>	