



**Property Management**  
**Referral Form**

Date: \_\_\_\_\_  
To: Lia Oishi or Jeanne Kaneda  
Phone: (702) 431-1200 ext. 204 or 206 Fax: (702) 431-1211  
From: \_\_\_\_\_ Phone: \_\_\_\_\_  
Company: \_\_\_\_\_ Fax: \_\_\_\_\_

My Client is interested in **property management** service:

- Client's Name: \_\_\_\_\_
- Subject Property: \_\_\_\_\_  
\_\_\_\_\_
- Reason for interest in management? **(Circle One)**  
     Moving Out      2nd Home      Investor      Wasn't able to Sell
- Please call my client at:  
     Home Phone: \_\_\_\_\_ Best Time: \_\_\_\_\_  
     Work Phone: \_\_\_\_\_ Best Time: \_\_\_\_\_  
     Cell Phone: \_\_\_\_\_ Best Time: \_\_\_\_\_

**\*\*Attention Agent\*\***  
Submit this form to receive your  
referral commission after property  
is rented.



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**For Office Use Only**

Amount: \_\_\_\_\_ Check #: \_\_\_\_\_  
Approval By: \_\_\_\_\_ Amount: \_\_\_\_\_  
Date: \_\_\_\_\_ Check Date: \_\_\_\_\_  
By: \_\_\_\_\_