



Management Services

REO MANAGEMENT SERVICES, INC.

BROKER INFORMATION

Contact Person: _____

Company Name: _____

Telephone No.: _____ (800) No.: _____

Fax No.: _____ Email Address: _____

Mobil/Voicemail: _____ Pager : _____

Address: _____

City: _____ State: _____ Zip: _____

Tax ID No./SS No.: _____ License No.: _____

Service Area: (Please list only areas where you are a member of the MLS)

Zip Codes Service: (Towns within a ten (10) mile radius of your office)

History with similar properties:

Marketing Strategy:

Signature:

Date: