

First Time Homebuyer's Assistance Fund

BROKERAGE PARTICIPATION AUTHORIZATION FORM

Name of Brokerage:	
Office:	
Email:	
By signing this form, my brokerage firm agrees to participate in the following level of contribut (please check one from the list below):	ıtion
\$25.00 \$50.00 \$100.00 \$200.00	
The amount indicated above will be deducted from the firm's commission for each transace and deposited into a TAR non-profit escrow account to assist First Time Homebuyers in the laregion served by the Telluride Association of REALTORS [®] . I understand my Company name will isted in semi-annual newspaper advertisements under the level I have specified.	local
Signature Date	

Please return this form to TAR
Fax-728-5270, Email- office@telluriderealtors.net
or PO Box 2485, Telluride, CO 81435