



For Internal Use Only

Date of Offer: \_\_\_\_\_ IN2ITION Salesperson: \_\_\_\_\_  
Suite Number: 904 Tower: 2 Floorplan: 6 Level No.: 9 Unit No.: 01

Please check off one of the following, if YES continued to the section below.

Associated Co-operating Agent:      ☐ YES      ☐ NO

Broker Co-operation Information Sheet

In2ition Status of Co-operating Agent:

General      ☐

VIP      ☐

Exclusive      ☐

Attach Business Card Here

Commission Rate Offered: \_\_\_\_\_

OFFER NOTES: