

FACILITATION AGREEMENT

This Facilitation Agreement is made between:

Employer(s): _____
 Address: _____
 Telephone: _____
 Broker: _____
 Address: _____
 Telephone: _____

In consideration of the mutual promises set forth, the Employer and Broker agree as follows:

1. **Purpose.** The Employer desires that the Broker act as a facilitator or middleman to assist the Employer and the other party to a real estate transaction ("Transaction"), identified as: _____

2. **Services To Be Provided By Broker.** The Broker, together with associated salespersons, agrees to provide real estate counseling, advice and other assistance to the Employer and to the other party to the Transaction in an effort to help them reach agreement and complete the Transaction. It is understood and agreed that the Broker is solely an facilitator or middleman and **is not an agent for either the Employer or other party to the Transaction and will not owe fiduciary duties to either.** It is also understood and agreed that there is likely to be a conflict for the Broker to provide counseling, advice or assistance to both parties. The Employer consents to this role. The Employer has been informed to seek independent legal advice with regard to the Transaction and all related documents and issues. It is understood and agreed that the Broker has not been retained as an attorney, inspector, home inspector, pest/termite inspector, septic inspector, surveyor or to determine the condition of the real property and has not been retained to perform a title search or to act as a mortgage broker. The Broker recommends that an attorney and other professionals be hired for such services and that the Employer personally investigate particular matters which may be of importance. This Agreement may be terminated by either party upon twenty-four (24) hours written notice, but Broker shall be entitled to compensation earned and costs incurred in accordance with paragraph 3, below.

3. **Compensation.** The Employer agrees to pay the Broker on the following terms: _____

EMPLOYER Date

BROKER or Authorized Representative Date

EMPLOYER Date