



Brokerage Cooperation, Buyer Registration, and Confidentiality Agreement

Passport Hotel Group (“PHG”) has been retained as Seller’s Exclusive Listing Agent to market the property commonly known as the Ramada Inn, 200 east Childs Ave., Merced, California

Clients from your office must be registered with Passport Hotel Group (“PHG”) prior to PHG submitting data on the above referenced property. Full contact information is required below without exception:

Client Name/Company

Address

City, State, Zip

Phone / Fax

Agreement

1. All contacts with the Seller(s) must be made through PHG.
2. The undersigned broker will hold and declare unconditionally that he or she will not disclose any data regarding the above mentioned property to other brokers or parties except those listed above.
3. The undersigned broker will make all inspection appointment for said property through PHG and will not contact the employees or owner directly.
4. The undersigned broker is not authorized to solicit offers for the property through any means of written advertisement.
5. This agreement is made solely on the above-mentioned property.

Commission

It is understood that PHG will cooperate with the broker/agent referenced below only if they are the procuring broker on the above-mentioned property. Cooperating Broker will be entitled to a commission equal to **50%** of the total commission received. Should cooperating broker not be present at all showings, inspections, takeover, etc. a 10% service fee will be deducted from the commission. It is further understood the above stated commission will be paid when and how the Commission is received per the above percentage. Cooperating Broker agrees to represent the buyer in all parts of the transaction, will be in attendance with the buyer at all showings of the property, meetings with the seller, buyer due diligence activities and the day of escrow closing and change-over. In the event the Cooperating Broker is unable to perform all or part of these duties, the above stated commission may be adjusted.

Dated this _____ day of _____, 20____.

Agent Name

Fax completed form to:

Address

Passport Hotel Group

City, State Zip

Fax: 415 727 3939

Phone / Fax Numbers

Email:

Fax completed copy to 707 945 1023