



HUDSON GATEWAY MULTIPLE LISTING SERVICE, INC.

60 South Broadway, White Plains, New York 10601

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9 Coates Drive, Suite 1, Goshen, New York 10924 ▪ 845.294.7905

2 Medical Park Drive, Suite 17A, West Nyack, New York 10994 ▪ 845.735.0075

Owner Name "Withheld"

To: HGMLS

From: _____
(Please Print)

name of seller(s)

Re: Exclusive Listing Agreement for property located at:

(Please Print)

(Please Print)

We request that our Broker

(Please Print)

(Name of broker)

enter "withheld" in the computer field designated for seller's name. We understand that this does not preclude anyone knowing our names by checking tax records

Seller's signature

Seller's signature

Broker/Manager: _____
Required Signature

Date: _____

FOR BROKER ONLY	
Broker office Code _____	ML# _____
Broker to submit this form to the HGMLS along with a copy of the listing contract	