



MLS Subscriber (Agent) AFFILIATION Application

Agent Information:

Agent Name _____
Print Name as it appears on DRE License

Mailing Address _____
Address

City State Zip

Agent Phone #: (____) _____ - _____ Additional Phone#: (____) _____ - _____
(Will appear in listings and directory)

DRE License #: _____ Agent Fax #: _____

Email Address: _____

Web Address: _____

Office Information:

Firm Name (dba) _____ Firm #: _____

Office Address _____
Address Suite #

City State Zip

Telephone # (____) _____ - _____ Fax # (____) _____ - _____

- 1) I have received and agree to abide by the Rules and Regulations and all administrative policies. I will observe these Rules with such amendments as may be made hereafter as long as I remain a Subscriber.
- 2) I agree to complete the MLS Orientation requirements within 30 days of my join date. Failure to complete this requirement will result in interruption of MLS services, including but not limited to, MLS access and Sentrilock Key services.
- 3) Participants and subscribers are responsible for the security of their agent ID and pass codes and shall not give or allow use of or make available their pass codes to any person.
- 4) In the event I fail to maintain eligibility for membership, for any reason, I understand fees are non-refundable.

Agent Signature certifying the above to be true and correct _____ / /
Date

The above licensee is affiliated with my office. This authorizes his/her access to the SANDICOR, Inc. Multiple Listing Service. Further I understand that I am responsible for the agent's use or misuse of the service in accordance with the Rules and Regulations.

Broker of Record Signature _____ / /
Date

Service Center Use:
Agent ID: _____
Orientation Date: _____