

MLS Subscriber Application



| APPLICANT I | NFORMATION | | | | |
|-----------------------|---------------------------|-------------|--------------------|----------------------|-------|
| Date: | | | | | |
| Name: | | | | | |
| Home Address: | | | | | |
| | Street Phone: | City | | Coll Phone | Zip |
| Preferred Contact | . Filolie | | 11115 15 a | Cell Filolie La | mame |
| Email: | | _ Website | e: | | |
| FIRM INFORI | MATION | | | | |
| Office Name: | | _ | | | |
| | | | | | |
| | Street | City | State | Zip | |
| Office Phone: | | | Office Fax: | | |
| Office Email: | | | Website: | | |
| | | | | | |
| LICENSE INFO | ORMATION | | | | |
| Broker License #: | | | Exp. Date: | | _ |
| Last 4 Digits of SSI | N#: | | | | |
| Government-Issue | ed ID: | | Exp. Date | e: | |
| | (Drivers License, II | Card, Pa | ssport) | | |
| Please list all curro | ent and past REALTOR® A | Associatio | ns of which you h | ave been affiliated: | |
| If you are transfer | ring from another Associ | ation: | | | _ |
| Do you have any p | pending Grievance Comp | laints or A | arbitration Hearin | gs?Yes N | o N/A |
| Do you have any ι | oN/A | | | | |
| Have you had bee | n disciplined by the Real | Estate Co | mmission? | Yes N | o N/A |
| | | | | | |

Kosciusko Board of REALTORS® - 475 Anchorage Road, Suite 2—Warsaw, IN 46582 (574)269-6706 kbor@kbor.com

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| RI | EQUIRED ACKNOWLEDGMENTS |
|------|--|
| То | the Kosciusko Board of REALTORS® Multiple Listing Service, Inc., |
| Ι, _ | of |
| - | Name Firm |
| he | reby apply for MLS Service with the Kosciusko Board of REALTORS® Multiple Listing Service. |
| En | closed is my check in the amount of \$60 for my first month of MLS service, which I understand will be returned to me |
| | the event I am not accepted to MLS Membership after Board review. In the event my application is approved, your onthly MLS service fee will then be billed to your firm. |
| Ιa | Iso acknowledge and agree to the following: |
| • | I understand I am required to submit a copy of my Indiana Real Estate License as a condition of membership. |
| • | I understand that my MLS fees are non-refundable. In the event I fail to maintain eligibility for membership in the MLS service for any reason under the Bylaws or MLS Rules and Regulations, including but not limited to discipline by the MLS, I understand I will not be entitled to a refund of MLS Fees. |
| • | I agree not to give or sell my password to any person nor make it available to any person. I agree not to allow such unauthorized access by use of my pass codes. |
| • | I acknowledge receipt of a copy of the Rules and Regulations of the MLS and agree to abide by such Rules and |
| | Regulations as they exist and as they may from time-to-time be amended including payment of monthly fees. |
| • | I understand that by providing above mailing address(es), e-mail address(es), telephone number(s), and fax number(s), I consent to receive communications sent from the MLS via U.S. mail, e-mail, telephone, or fax at those number(s)/locations(s). |
| • | I agree a condition of participation in the MLS is that I agree to binding arbitration of disputes. In the event of any dispute arising out of a real estate business between other Subscribers/Participants and myself (including any licensee employed or associated with my office), said dispute shall be submitted to binding arbitration. |
| • | I further agree to be bound by the Code of Ethics on the same terms and conditions including the obligation to submit to ethics hearings and the duty to arbitrate contractual disputes with other REALTORS® in accordance with the established procedures of the Board. I understand that a violation of the Code of Ethics may result in termination of my MLS privileges. |

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| Required Signature My signature below certifies that I have read and agree to the terms and acknowledgements and that all information provided on my application is true and correct. I am agreeing to abide by the Bylaws, Rules and Regulations and other policies as established and that may be amended from time to time by the MLS. | | | | | | | | | | |
|--|--|--|--|--|--|--|--|------------|-------|--|
| | | | | | | | | Signature: | Date: | |
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| Return Completed Applications to: | | | | | | | | | | |
| Kosciusko Board of REALTORS® MLS | | | | | | | | | | |
| 475 Anchorage Road, Suite 2 | | | | | | | | | | |
| Warsaw, IN 46582 Or | | | | | | | | | | |
| kbor@kbor.com | | | | | | | | | | |
| Questions: | | | | | | | | | | |
| 574.269.6706 | | | | | | | | | | |

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