NEW DESIGNATED PARTICIPANT INSTRUCTION SHEET

Call Sherrilyn Weaver with the Association of REALTORS[®] at 396-0256 to make an appointment. ALL FORMS OF PAYMENT ARE ACCEPTED. YOU WILL NEED AT LEAST 2 BLANK CHECKS. THE EXACT TOTALS WILL BE PROVIDED TO YOU PRIOR TO YOUR APPOINTMENT.

Plan to attend the new member Orientation within 90 days of membership if you have not completed Orientation as a REALTOR.

Application fee for Broker \$800.00

MAAR Dues:

Jan 2016	\$642.00	+\$800	\$1442.00	July 2016	\$439.00	+\$800	\$1239.00
Feb 2016	\$608.16	+\$800	\$1408.16	Aug 2016	\$405.16	+\$800	\$1205.16
Mar 2016	\$574.34	+\$800	\$1374.34	Sept 2016	\$371.34	+\$800	\$1171.34
Apr 2016	\$540.50	+\$800	\$1340.50	Oct 2016	\$337.50	+\$800	\$1137.50
May 2016	\$506.66	+\$800	\$1306.66	Nov 2016	\$303.66	+\$800	\$1103.66
June 2016	\$472.84	+\$800	\$1272.84	Dec 2016	\$269.84	+\$800	\$1069.84

Multiple Listing Service User Fee

.	0		
Jan 2016	\$237.52	July 2016	475.00
Feb 2016	\$197.94	Aug 2016	435.42
Mar 2016	\$158.36	Sept 2016	395.84
Apr 2016	\$118.78	Oct 2016	356.26
May 2016	\$79.20	Nov 2016	316.68
June 2016	\$39.62	Dec 2016	277.10

Dues and fees are paid in advance and are nonrefundable!

APPLICANTS FOR DESIGNATED REALTOR[®] MUST ATTACH A COPY OF THEIR REAL ESTATE LICENSE OR APPRAISER'S LICENSE OR CERTIFICATION, A PHOTO OF THEIR OFFICE REAL ESTATE OFFICES ONLY; APPRAISERS ARE NOT REQUIRED TO PROVIDE A PHOTO.

Keys

Keys will be issued by appointment only. There are two key-types. The Active Key (ActiveKey) is issued through MAAR. The Electronic key (E-key) requires that the key holder first purchase a compatible device. (Most smartphones are compatible check here for details on which devices <u>http://www.supraekey.com/Documents/current_devices.pdf</u>)

NOTE: All SUPRA equipment is leased. Should you discontinue your membership with the Association/MLS ALL Supra equipment must be returned to MAAR before you will be released from the Supra lease.

APPLICATION FOR NEW DESIGNATED REALTOR

APPLICATION DATE					
FIRST NAME	LAST NAM	1E			
OFFICE NAME					
HOME ADDRESS					
Street	City	State	Zip		
OFFICE PHONE ()	OFFICE FAX ()			
PERSONAL/CELL # TO APPEAR IN MLS ()				
BIRTH DATE/ LICENSE #					
EMAIL ADDRESS					
MAAR DR APPLICATION \$800.00 (AMOUN	IT PREPAID \$)			
DR APPLICATION/ BALANCE PAID TODAY	\$				
DR MAAR DUES	\$				
Total MAAR CHECK	\$				
DR TOTAL MLS Annual Fees	\$				

OUR MLS PASSWORD PROTECTED WEBSITE IS <u>www.alamls.net</u> (please see also the public site <u>www.alamls.com</u>.)

Your MLS ID/USERNAME will be:	
Your PASSWORD Is:	(CAPITOL LETTERS)
Our By-Laws require your attendance of t	the REALTOR [®] Orientation.
2016 Orientation Dates: January 14, 201	6, April 21, 2016, July 14, 2016,
and October 13, 2016	
Appraisers must attend within 90 days jo	ining MLS.

SUPRA INFO: SUPRA ISSUANCE FEE (FOR KEY) \$60(Active Key) \$50(eKey) upon receipt of KEY

_			_	
	AREC License Verified			NRDS
	Appraiser Board Verified			MLS
	Rapattoni			KimWeb – Supra

SECTION I

Ι,

TO: THE MONTGOMERY AREA ASSOCIATION OF REALTORS®

hereby apply

for **DESIGNATED REALTOR®** membership in the Montgomery Area Association of REALTORS® and enclose my check in the amount of \$ which I understand will be returned to me in the event I am not accepted to membership. In the event my application is approved, I agree as a condition to membership to complete the orientation course of the Montgomery Area Association of REALTORS[®] and otherwise on my own initiative to thoroughly familiarize myself with the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, including the duty to arbitrate business disputes in accordance with the Code of Ethics and Arbitration Manual of the Association and the Constitutions, Bylaws and Rules and Regulations of the Montgomery Area Association of REALTORS® the Alabama Association and the National Association, and I further agree to complete satisfactorily a reasonable and nondiscriminatory written examination covering such Code, Constitutions, Bylaws, Rules and Regulations, and duty to arbitrate. I further agree that my act of paying dues shall evidence may initial and continuing commitment to abide by the aforementioned Code of Ethics, Constitutions, Bylaws, Rules and Regulations, and duty to arbitrate, all as from time to time amended. Finally, I consent and authorize the Association, through its Membership Committee or otherwise, to invite and receive information and comment about me from any Member or other person, and I agree that any information and comment furnished to the Association by any Member or other person in response to any such invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel or defamation of character.

NOTE: Applicant acknowledges that if accepted as a Member and he/she subsequently resigns or is expelled from membership in the Association with an ethics complaint or arbitration request pending, the Board of Directors may conditionally renew the membership upon applicant's verification that he/she will submit to the pending ethics or arbitration proceeding and will abide by the decision of the Hearing Panel; or if applicant resigns or is expelled from membership without having complied with an award in arbitration, the Board of Directors may condition renewal of membership upon his/her payment of the award, plus any costs that have previously been established as due and payable in relation thereto, provided that the aware and such costs have not, in the interim, been otherwise satisfied. I hereby submit the following information for your consideration:

(PLEASE PRINT)						
Mr. /Ms			(as shown on license or name you wish to			
appear on the roste	er)					
Type of License:	Qualifying Broker Associate Broker					
			License No			
	Salesperson	1	License No			
	Appraiser		License No.			
	Other (Please Specify					
Office Phone Numb	oer		Fax Number			
Office Address						
Mailing Address						
Home Address						
E-Mail Address						
Check whether:	•	rietor				
	DBA					
	Partnersh	ір				
	Corporatio	on				
State position with	firm:	Principal				
		Partner				
		Office Mana	ager			
		Independen	nt Contractor			
		Corporate Officer				
		Appraiser				
		Employee				
Lagree that, if acco	epted for M		in the Association, I shall pay the fees and dues as			
from time to time e	-	· · · · · · · · · · · · · · · · · · ·				

Dated: ______ Signed: _____

SECTION II

State the names and titles of all other principals, partner or corporate officers of your firm.

Name(s)

Title(s)

Is the office address, as stated in Section I your principal place of business: Yes No

List the name and address of all branch offices or other real estate firms in which you are a principal, partner or corporate officer within the jurisdiction of the Board:

Name

Address

- Do you hold, or have you ever held, a real estate license or real estate appraiser's certification or license in any other state?
 Yes
 No If yes, What state:
- Has your real estate license or real estate appraiser's certification or license, in this or any other state, been suspended or revoked?
 Yes
 No.
 If "Yes", specify the place(s) and date(s) of such action and detail the circumstances relating thereto in an attachment.
- Are there now any pending or unresolved complaints, or have there been within the past 5 years, any complaints against you or the firm with which you have been associates before any state real estate regulatory agency or any other agency of government? Yes No. If "Yes", specify the substances of each compliant in each state, the agency before which compliant was made, the current status or resolution of such compliant and attach to this application.*
- If you have ever been convicted of a felony, attach details including state and court of conviction.
 Yes
 No
- Are you, or any real estate or appraisal firm in which you are a sole proprietor, general partner or corporate officer, involved in any pending bankruptcy or insolvency proceedings or have you or any real estate or appraisal firm in which you are a sole proprietor, general partner or a corporate officer been adjudged bankrupt in the past three (3) years? Yes No. If "Yes", specify the place(s) and date(s) of such action, and detail the circumstances relating thereto in an attachment.

SECTION III

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, may be grounds for revocation of my membership if granted.

Signed _____

SECTION IV

Information supplied under section IV is not required, but will assist the Association establishing historical data regarding its members. Information furnished under section IV will not be used in evaluating an applicant's qualifications for membership.

PERSONAL DATA

Date of birth:	/ Year			
Highest level of education completed				
First Licensed or certified in Alabama				
Have you been engaged continuously If no, during what years were you			Yes	No to
In what phase of real estate do you sp	pecialize?			
In what other business have you beer	n engaged?			
Established with present real estate o	r appraisal firm	Yes	No	
Are you a member of any other real e if "Yes", attach the names of each Ass establishing the time period for which	ociation/Board, type of n	nembership	N held and	-
Have you participated in a Multiple Lis	sting service?	Yes	No	
If yes, where?				
Are you now employed or engaged in	any other business or pro	ofession?	Yes	No

Montgomery Area Association of REALTORS® and Multiple Listing Service, Inc.

Membership disclosure and agreement effective December 31, 2014

I acknowledge and understand that the Montgomery Area Association of REALTORS[®] billing period is based on a calendar year (January-December). Cost for membership is calculated on the date of enrollment. Dues and fees are paid in advance, non-refundable (example: join date January 2016 total dues owed Designated REALTOR[®] = \$542.00 or REALTOR[®]/Non-Member sales agent = \$441.00).

And/or

Multiple Listing Service Inc. billing period is based on a fiscal year (July 1, XX-June 30, XX). All services are paid in advance. Cost for membership is calculated on the date of enrollment. Dues and fees are paid in advance, non-refundable (example: join date July 1, XX- June 30, XX = \$475.00 or December 1 XX-June 30, XX = \$277.10 which equals to \$39.62 per month.

There are no refunds upon termination of membership and or services.

Print Name

Signature