

North Central Indiana Association of Realtors®, Inc

APPLICATION FOR REALTOR® MLS MEMBERSHIP

Membership Application Procedure

You must complete all items in “RED” that apply to your membership application.

The following items must be completed and signed:

- **ALL applications must be received at the NCIAR Board Office with the \$100 non-refundable application fee and a letter of good standing from your Primary Board, before the application process begins. Please send your completed application, letter of good standing, along with payment for the correct amount due.** Make check payable to NCIAR and send to: NCIAR, 409 N Michigan St., Plymouth, IN 46563, or **the \$100 application fee** can be paid by credit card.
- You must sign and date page 5 and complete the MLS Participation Agreement and sign and date where indicated on page 7.
- The Managing Broker **MUST** complete the MLS Participation Agreement on page 7.
- Applications will then be forwarded by the Association Executive to the MLS Board of Directors for approval.
- Providing no objections have been received, and the NCIAR MLS Board of Directors approves the application, it will then be processed by the NCIAR Board Office and added to the MLS System. Access information to the IRMLS (Indiana Regional Multiple Listings Service) along with any other information is usually sent within 7 to 10 days of the approval of membership.
- You must provide a copy of the digitally certified proof of licensure issued from the State of Indiana. This needs to be attached to your membership application.
- Applications that are incomplete for ANY reason or for not using the application approved by NCIAR will be returned to you for completion on the correct membership application.
- NOTE: When a new broker licensee becomes associated with an agency who is a member of the Multiple Listing Service (MLS) they **MAY NOT** submit listings to the MLS before obtaining approval of membership with North Central Indiana Association of Realtors, Inc., (NCIAR). This also includes ALL advertising and soliciting of listings.

North Central Indiana Association of Realtors®, Inc.

APPLICATION FOR REALTOR® MLS MEMBERSHIP

I hereby apply for MLS Membership in the **North Central Indiana Association of Realtors Inc.** **Application Fee: enclosed is payment in the amount of \$100** payable directly to the NCIAR Association of REALTORS®, Inc. (NCIAR). **I understand that the application fee is non-refundable.** Upon acceptance, I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, which includes the duty to arbitrate (or to mediate if required by the association) and the Constitution, Bylaws and Rules and Regulations of the above-named Association, the State Association, and the National Association. I understand that membership brings certain privileges and obligations that require compliance. Membership is final only upon approval by the MLS Board of Directors and may be revoked should completion of requirements not be submitted.

NOTE: *Applicant acknowledges that if accepted as a member and he/she subsequently resigns from the Association or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may have conditional renewal of membership upon applicant’s certification, that he/she will submit to the pending ethics proceeding and will abide by the decision of the hearing panel. If applicant resigns or otherwise causes membership to terminate, the duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose while applicant was a REALTOR®.*

Personal Information:					
Note: ALL information in "RED" is required					
First Name		Middle Name			
Last Name		Suffix	____ (Jr, III, Sr, Etc.)		
Nickname (DBA):					
Home Address:					
City:		State:		Zip:	
Home Phone:		Cell Phone:			
Email Address:		Secondary Email:			
Real Estate License #					
Licensed/Certified Appraiser:	YES / NO	Appraisal License #		NAR membership (NRDS) #	

APPLICATION FOR REALTOR® MLS MEMBERSHIP

Company Information:						
Office Name:						
Office Address:						
Office Phone:				Fax:		
Company Type:	<input type="radio"/> Sole Proprietor <input type="radio"/> Partner <input type="radio"/> Corporation <input type="radio"/> LLC (Limited Liability Company) <input type="radio"/> Other (please specify)					
Your Position:	<input type="radio"/> Principal <input type="radio"/> Partner <input type="radio"/> Corporate Officer <input type="radio"/> Majority Shareholder <input type="radio"/> Branch Office Manager <input type="radio"/> Non-principal Licensee <input type="radio"/> Other: _____					
Names of other Partners/Officers of your firm:						

Preferred Mailings / Contact Information: NEW MEMBER INFORMATION REQUIRED					
Initial Password for Association Site (if applicable):					
Preferred Phone:	<input type="radio"/> Home <input type="radio"/> Office <input type="radio"/> Cell				
Preferred Email:	<input type="radio"/> Primary Email <input type="radio"/> Secondary Email				
Preferred Mailing:	<input type="radio"/> Home <input type="radio"/> Office <input type="radio"/> Office Mail Alternative <input type="radio"/> Member Mail Alternate				
Mail Publications to:	<input type="radio"/> Home <input type="radio"/> Office <input type="radio"/> Office Mail Alternative <input type="radio"/> Member Mail Alternate				
Office Mailing Alternate:					
Address:					
City:			State:		
				Zip:	

Applicant Information:					
Name of other Association of REALTORS® that you are a member:					
Name of Association:					
Type of membership held:					
Have you previously held membership in any other Association of REALTORS®? <input type="radio"/> Yes <input type="radio"/> No					
If yes, name of Association:					
Type of membership held:					
Have you been found in violation of the code of Ethics or other membership duties in any Association of REALTORS® in the past three (3) years or are there any such complaints pending? <input type="radio"/> Yes <input type="radio"/> No					
(If yes, provide details)					
Have you ever been refused membership in any other Association of REALTORS®?				<input type="radio"/> Yes	<input type="radio"/> No

APPLICATION FOR REALTOR® MLS MEMBERSHIP

If yes, state the basis for each such refusal and detail the circumstances related thereto:				
Is the Office Address, as stated, your principal place of business? <input type="radio"/> Yes <input type="radio"/> No				
If not, or if you have any branch offices, please indicate, and give address:	Address:			
	City:		State:	
			Zip:	
Do you hold, or have you ever held, a real estate license in any other state? <input type="radio"/> Yes <input type="radio"/> No				
If so, where:				
Have you or your firm been found in violation of state real estate licensing regulations or other laws prohibiting unprofessional conduct rendered by the courts or other lawful authorities within the last three (3) years? <input type="radio"/> Yes <input type="radio"/> No				
If yes, provide details:				
Have you or your firm been convicted of a felony or other crime? <input type="radio"/> Yes <input type="radio"/> No				
If yes, provide details:				

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, shall be grounds for revocation of my membership if granted. I further agree that, if accepted for membership in the MLS Board, I shall pay the fees and dues as from time to time established. **NOTE:** Payments to the North Central Indiana Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. No refunds.

By signing below I consent that the REALTOR® Associations (local, state, national) and their subsidiaries, if any (e.g. MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address or other means of communication available. This consent applies to changes in contact information that may be provided by me to the Association(s) in the future. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my membership.

Signature: _____

Dated: _____

Information to be supplied by Local Association

Join Date:	
Status: <input type="checkbox"/> Active <input type="checkbox"/> Provisional	
Primary Local Association NRDS ID #	
Primary State Association NRDS ID #	
Office ID:	
(if broker)	
Office Contact (Managing Broker)	
Office Contact Manager:	
Number of Non-Member Licensees:	

MLS PARTICIPATION AGREEMENT

(For MLS access by MLS USERS and/or SUBSCRIBERS)

I agree as a condition of participation in the MLS to abide by all relevant bylaws, rules and regulations and other obligations of participation including payment of fees. Your monthly MLS fee is billed on the 15th of the month in the amount of \$60 (at the discretion of the MLS Board may from time to time be adjusted) and must be paid by the 30th of the month of billing. Failure to pay on time will result in a \$25 late fee added to your balance due. All billing statements will be sent the day of completion to your current e-mail that we have on file. I further agree to be bound by the Code of Ethics on the same terms and conditions as board/association members, as established in the *Code of Ethics and Arbitration Manuel*, 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/association. I understand that a violation of the Code of Ethics may result in suspension or termination of MLS rights and privileges and that I may be assessed an administrative processing fee, which may be in addition to any discipline, including fines, that may be imposed on participants or subscribers as discipline for violations of MLS rules or other MLS governance provision not greater than fifteen thousand (\$15,000) dollars. (adopted 11/07)

Signature of participant, user or subscriber

Date

TO BE COMPLETED BY BROKER/OWNER

I have reviewed the new Membership Application and find all information to be completed as required

Broker/Owner printed or typed

Date

Broker/Owner Signature