

Northwest Montana Association of REALTORS
Multiple Listing Service, Inc.
110 Cooperative Way
Kalispell, MT 59901
406-752-4197 (Phone) 406-752-7834 (Fax)

Application for MLS Only Access

All applicants are required to complete SECTION I.

I, _____ hereby apply for **MLS ONLY** membership in the above named Multiple Listing Service, and enclose my check in the amount of **\$250.00**, which I understand will be returned to me if I am not accepted. If my application is approved, I agree to complete the MLS Orientation course, if any, within the time required, of the above name MLS and otherwise on my own initiative to **thoroughly** familiarize myself with the Code of Ethics of the National Association of REALTORS®, including the MLS Bylaws and Rules and Regulations of the above named MLS, which can be found at www.nmar.com or in the orientation packet, the State Association and the National Association, within 60 days of application. I further agree that my act of paying fees shall evidence my initial and continuing commitment to abide by the aforementioned Bylaws, Rules and Regulations all as from time to time amended. Finally, I consent and authorize the MLS to invite and receive information and comment about me from 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: NMAR AND NMAR, MLS require a photo ID presented in person by all applicants for membership or Participation. If a rare or extreme circumstance should arise that makes this not possible, then the application will be considered by the Bard of Directors with legal counsel's guidance and a letter from the applicant stating why it is not possible to appear with a photo ID. Lock box keys can only be issued to Association Primary or Secondary Members.

NOTE: Applicant acknowledges that if he/she is accepted into the MLS and subsequently resigns and is a non-member for one year or longer, membership application process, including payment of application fee, must begin anew.

SECTION I

I hereby submit the following information for your consideration:

Name as shown on license _____
(Please Print)

License No. _____ First licensed in the state of Montana _____
(Month/Date/Year)

Specify (circle one): Broker Salesperson Other _____

9 digit No. to be used for ID _____

Home Address _____
(City) (State, Zip)

Home Phone _____ Cell Phone _____ E-mail address _____

Office Name: _____

Office Address: _____
(City) (State, Zip)

Office Phone _____ Office fax _____ E-mail Address: _____

Do you hold, or have you held, a real estate license in any other state? ___ Yes ___ No
If yes, specify: _____

Has your real estate 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.

Are you presently a member of any other Association of REALTORS®? ___ Yes ___ No
If yes, name of Association and type of membership held: _____

Have you previously held membership in any other Association of REALTORS®? ___ Yes ___ No
If yes, name of Association and type of membership held: _____

Are you a member of any other Real Estate board **NOT** affiliated with the National Association of REALTORS®? ___ Yes ___ No
If yes, name of Board and type of membership held: _____

Are you a member of an Institute, Society, or Council affiliated with the National Association of REALTORS®? ___ Yes ___ No
If yes, name of Association and type of membership held: _____

Have you participated in a Multiple Listing Service? ___ Yes ___ No
If yes, where: _____
(Name of MLS) (City, State) (Phone)

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? ___ Yes ___ No (If yes, provide details as an attachment.)

Have you ever been convicted of a felony? ___ Yes ___ No (If yes, provide details IN A SEALED ENVELOPE MARKED "CONFIDENTIAL".)

I hereby certify that the foregoing information furnished by me is true and correct. 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. I will attend MLS Orientation on _____ at 9:00 AM, which is at the Association Office. I agree that, if accepted for Multiple Listing Service, I shall pay the fees as from time to time established.

Dated: _____ Signed: _____
(Applicant's Signature)

SECTION II

INFORMATION RURNISHED UNDER SECTION IV WILL NOT BE USED IN EVALUATING AN APPLICANT'S QUALIFICATIONS FOR MEMBERSHIP. INFORMATION SUPPLIED UNDER SECTION IV IS NOT REQUIRED, BUT WILL ASSISTE THE MULTIPLE LISTING SERVICE IN ESTABLISHING HISTORICAL DATA REGARDING ITS MEMBERS.

PERSONAL DATA

Place of birth _____
(City or County) (State)

Date of birth ____/____/____ Ethnic/National Origin _____

Highest level of education completed _____

First entered real estate business ____/____/____, at _____
(City) (State)

Have you been engaged continuously in the business since then? Yes No

If "No", what years were you in the business? _____

How many years have you been active in the real estate profession? _____

Salesperson _____ years Broker _____ years Other _____ years

In what phase of real estate do you specialize? _____

In what other business have you been engaged?

_____ from _____ to _____ at _____
(City)

_____ from _____ to _____ at _____
(City)

_____ from _____ to _____ at _____
(City)

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110 Cooperative Way
Kalispell, Montana 59901
(406) 752-4197 FAX (406) 752-7834
Email: nmar@mlsnmar.com

REALTOR® Association Marketing Consent Form

Name: _____

Office: _____

Address: _____

City, State, Zip: _____

Phone: _____

Fax: _____

Email: _____

I understand that by providing above my mailing address(es), email address(es), telephone number(s), and fax number(s), I consent to receive communication from Northwest Montana Association of Realtors, MLS Inc., Montana Association of Realtors, and the NATIONAL ASSOCIATION OF REALTORS® via U.S. mail, email, telephone, or facsimile at those number(s)/location(s).

Signature: _____

Date: _____

**NORTHWEST MONTANA ASSOCIATION OF REALTORS®
MULTIPLE LISTING SERVICE (MLS)
SUBSCRIBER COVENANT**

I understand and agree that as a subscriber to the Northwest Montana Association of REALTORS® Multiple Listing Service, I am subject to the rules and regulations of the MLS. Some of these rules apply to the confidentiality of MLS information.

Section 10 – Confidentiality of MLS Information: Any information provided by the Multiple Listing Service to the Participants shall be considered official information of the Service. Such information shall be considered confidential and exclusively for the use of Participants and real estate licensees affiliated with such Participants and those participants who are licensed or certified by an appropriate state regulatory agency to engage in the appraisal of real property and licensed or certified appraisers affiliated with such participants.

Section 12 – Distribution: Participants shall, at all times, maintain control over and responsibility for each copy of any MLS compilation leased to them by the MLS and shall not distribute any such copies to persons other than subscribers....

I agree that no exact measure of the damage to be caused to the MLS and its members by a breach of my covenants contained herein can be determined, and for the purpose of liquidating the amount of damages, and not as a penalty, it is agreed that in case of a breach by me of this agreement, the damages caused shall be and are fixed, liquidated and determined at the sum of ONE THOUSAND FIVE HUNDRED AND NO/100THS (\$1,500.00) DOLLARS. I understand that these damages may be collected from me in addition to any other action that may be taken against me, including my suspension or expulsion from the Service. The MLS is give the right to recover the sum from me by appropriate action in accordance with the Rules and Regulations of the MLS.

Dated this _____ day of _____, _____.

Subscriber