

CLERICAL APPLICATION

I, hereby apply for my registration in the Nevada County Association of REALTORS® ("NCAOR") Multiple Listing Service ("MLS") as a Clerical User. I understand that if I am employed by more than one Participant or Subscriber, I must sign a separate Clerical User registration form with each Participant and Subscriber.

Quarterly Access Fee will be billed by the Nevada County Association of REALTORS®

You may fax, hand-carry or mail your application package to NCAOR Office.

Please contact NCAOR to expedite your application request

FOR NCAOR STAFF USE ONLY

Member No: _____ Office No: _____

Applicant Information

First Name _____ Middle Initial _____ Last Name _____
(as it appears on your license)

Nickname _____
(as it appears on the Roster)

Home Address _____

City _____ State _____ Zip Code (+ Four) _____ - _____

Preferred Mailing Address Home Office

Office Phone _____ - _____ - _____ Extension _____

Home Phone _____ - _____ - _____ Cell Phone _____ - _____ - _____

DBA (If different than the name above): First Name _____ Last Name _____

Email: _____ Website: _____

Please send invoice to my Individual Office **Please send my mail to my** Home Office

Please place on NCAOR Roster: Cell Phone Email Website

Choose your Agent ID: _____ Choose your Password: _____
(Up to Twelve (12) characters and/or numbers) (Up to Nine (9) characters and/or numbers)

Office Information

NCAOR Subscriber you are working for: _____

At Office Address _____

City _____ State _____ Zip Code (+ Four) _____ - _____

Office Phone _____ - _____ - _____ Office Fax _____ - _____ - _____

License Information

I am registering with the NCAOR MLS as a Clerical User. (Check One)

I do have a BRE license/certification I do not have a BRE license/certification

If you have a license, please complete following questions.

BRE Lic. No. _____ DRE License Expiration _____ / _____ / _____

BREA Appraiser Lic. No. _____ OREA License Expiration _____ / _____ / _____

Drivers License Number: _____

MLS Access

Choose your Agent ID: _____
(Up to Twelve (12) characters and/or numbers)

Choose your Password: _____
(Up to Nine (9) characters and/or numbers)



CLERICAL APPLICATION

Applicant Information continued

I am also (or have been) a registered Clerical User of the following MLS(s): _____
 (select one): I have I have not been disciplined by one of the above MLS(s), and if I have been disciplined, I have attached copies of the discipline.
 I have I have not been disciplined by the BRE or BREA, and if I have been disciplined, I have attached copies of the discipline.

By signing this application, I understand and agree to abide by the MLS Rules and such other MLS Rules as may hereafter become applicable to Clerical Users:

- I meet the definition for registration as a Clerical User: "Clerical Users are individuals (whether licensed or unlicensed) employed by an MLS Participant or Subscriber and registered with the MLS who perform only clerical tasks that do not require a real estate license or an appraiser's certificate or license." (Rule 4.3)
- I understand that I may have access to the information contained in the MLS solely under the direction and supervision of my Participant and/or Subscriber and that I may not provide, display or reproduce any MLS information to persons other than my Participant and/or Subscriber with whom I am registered. (Rules 12.11, 12.12, 2.12, and 12.14.1)
- I understand that I will be assigned a unique user name ("Agent ID") by NCAOR for each individual Participant/Subscriber by whom I am employed. I agree that I shall not permit another person to use my Agent ID for access to the MLS computer system without authorization from NCAOR. I understand that unauthorized access to and/or use of computers, computer systems or computer data, including misuse of my Agent ID, is a crime under California penal code section 502. (Rule 12.17)
- I understand that I am not eligible to lease a Key nor may I use my Participant's and/or Subscriber's Key for any reason. (Rule 13.2)
- I understand that I am subject to a fine and/or other disciplinary action up to and including termination of MLS access and that my Participant and/or Subscriber may be subject to disciplinary action should I violate any applicable MLS Rule. (Rule 14.1) The procedures for NCAOR Rules violations hearings (Rule 15) shall be applicable, and I agree to comply with said procedures.

I authorize NCAOR or its representative(s) to verify any information in this application including contacting any MLS, the BRE, current or past brokers, Participants, Salespersons, Subscribers or business associates. I further authorize any MLS in which I have been a member or Participant or Subscriber to release all membership and disciplinary records to NCAOR or its representative(s).

I further authorize NCAOR or its representative(s) to use this information in determining future disciplinary sanctions. I waive any cause of action including, but not limited to, slander, libel or defamation of character resulting from such verification, evaluation or other processing of this application or use of the information gathered by NCAOR or its representative(s).

I understand and agree that if I wish to change, modify, or terminate my NCAOR MLS Service, I must so it in writing. I declare under penalty of perjury that the information given in this application is true and correct.

Executed at _____, CA

_____	Date	/	_____	/	_____
Clerical User Signature					
_____	Date	/	_____	/	_____
Signature of Participant					
_____	Date	/	_____	/	_____
Signature of Subscriber (Broker of Record)					

FOR NCAOR STAFF USE ONLY

- | | | |
|------------------------------------|-----------------------------------|--------------------------------|
| <input type="checkbox"/> IMS/MAGIC | <input type="checkbox"/> Password | <input type="checkbox"/> Supra |
| <input type="checkbox"/> Charges | <input type="checkbox"/> Invoice | |

Nevada County Association of REALTORS

336 Crown Point Circle
 Grass Valley, CA 95945
 Phone: (530) 272-2627
 Fax: (530) 272-2646

FOR NCAOR STAFF USE ONLY

NCAOR Staff Verification: _____	Fees Collected: Quarterly Fee	\$50.00
Input Date: _____		

