



**Assistant to  Broker /  Agent /  Appraiser (Please Check One)**

**Broker/Agent/Appraiser Information:**

Broker/Agent/Appraiser Name: _____			Pubic ID# _____		Office #: _____	
Office Address: _____					CA	
Street and Suite #		City		State		Zip Code
Office Phone #: _____			Fax #: _____			

It is understood that the Office/Personal Assistant will be sponsored by an MLS Participating or Subscribing Broker, Agent or Appraiser and that the Office/Personal Assistant’s access level will be the same as the employing Broker, Agent, or Appraiser. The Broker/Agent/Appraiser is responsible for ensuring that Office/Personal Assistants maintain the confidentiality of MLS information and access. If the Office/Personal Assistant breaches confidentiality, the Broker/Agent/Appraiser will be subject to penalties as outlined in the Multiple Listing Service Rules and Regulations which could include fines and/or disciplinary action.

**The fee for Office/Personal Assistants to access the MLS is as follows:**

One-time Application Fee:	\$100.00
One-time SafeMLS Security:	\$40.00
MLS/CRMLS Quarterly Fee:	
<b>Total Quarterly MLS Fees:</b>	

**Please note that all billing is done ELECTRONICALLY.**

**Agreement and Signatures:**

I acknowledge having received and read the MLS Rules and Regulations (<http://go.crmls.org/crmls-rules-and-regulations/>) and agree to abide by their terms as amended from time to time. In addition, I am responsible for the security of my access information to the MLS and will not share or make it available to any other person.

\_\_\_\_\_  
 Assistant Name (please print)                      Assistant Signature                      Date

I acknowledge that I am responsible for the Office/Personal Assistant named above and the confidentiality of MLS data and information as set forth in the MLS Rules and Regulations (<http://go.crmls.org/crmls-rules-and-regulations/>). I agree to pay any fees charged for the Office/Personal Assistant above and further agree to immediately notify the MLS and my Association of the Office/Personal Assistant’s termination of employment as my assistant.

\_\_\_\_\_  
 Agent Name (please print)                      Agent Signature                      Date

\_\_\_\_\_  
 Broker Name (please print)                      Broker Signature                      Date

**FOR OFFICE USE ONLY**

Date Received: \_\_\_/\_\_\_/\_\_\_ Fee Received: \$\_\_\_\_\_ Copy of CalBRE License: \_\_\_\_\_ Office #: \_\_\_\_\_  
 Member #: \_\_\_\_\_ Password: \_\_\_\_\_ Rapattoni: \_\_\_\_\_ CRMLS: \_\_\_\_\_ Clarity: \_\_\_\_\_ Supra: \_\_\_\_\_