



FIRM NAME _____ NRDS# _____

DESIGNATED BROKER: _____ NRDS # _____

BUSINESS ADDRESS: _____
(Physical location) (City/State/Zip)

BUSINESS ADDRESS: _____
(Mailing Address) (City/State/Zip)

PHONE: _____ FAX: _____ OFFICE EMAIL: _____

NAME OF PRIMARY MLS: _____

NAME OF PRIMARY REALTOR® ASSOCIATION: _____

APPLICANT AGREES:

1. Participation in the Service is available to the firm, partnership, or corporation of any REALTOR® principal of the Lower Yakima Valley Association of REALTORS® or any other Association/Board of REALTORS® without further qualification except payment of required dues and fees, and agreement to abide by the Bylaws and the Rules and Regulations of the MLS, and of the Lower Yakima Valley Association of REALTORS® (or otherwise stipulated). However, under no circumstances is any individual or firm, regardless of membership status, entitled to MLS "Membership" or "Participation" unless they hold a current, valid real estate broker's license and are capable of accepting and effecting compensation to and from other Participants or are licensed or certified by an appropriate state regulatory agency to engage in the appraisal of real property. Use of information developed by or published by the Service is strictly limited to the activities authorized under a Participant's licensure(s) or certification and unauthorized uses are prohibited. Further, none of the foregoing is intended to convey "Participation" or "Membership" or any right of access to information developed by or published by the Service where access to such information is prohibited by law. The REALTOR® principal of any firm, partnership, or corporation or the branch office manager designated by said firm, partnership, or corporation shall be termed the "Participant" in the Service and shall have all rights, benefits, and privileges of the Service, and shall accept all obligations to the Service for the Participant's firm, partnership, or corporation, and for compliance with the Bylaws and Rules and Regulations of the Service by all persons affiliated with the Participant who utilize the service.
2. Participant agrees to abide by the Bylaws and Rules and Regulations of the Service as from time to time amended or adopted. The MLS Only Participant also agrees to and understands Article 4.2.2 of the Bylaws of the Service.
3. Participant agrees to be bound by the Code of Ethics of the National Association of REALTORS® as established in the Code of Ethics and Arbitration Manual, and procedures as established in the Bylaws of the Service
4. Participant agrees to pay a non-refundable participation fee of **\$500.00** as set forth by the Board of Directors of the Service, subject to approval of the application. Additionally, Participant agrees to include a non-refundable initial account setup fee of **\$150** per licensee that will have access to the MLS. All fees must accompany application to be considered.
5. Participant hereby acknowledges the licensees affiliated with the "MLS Only Participant" as listed on page 2 of this application.
6. Payment of MLS fees for at least the first month for **each** licensed member of the "MLS Only Participant" office as indicated in #5 above must accompany application to be considered. Current MLS fees are **\$63.00** per month per member.
7. Participant agrees that a new Declaration of Membership is required to be filed with the Service on January 1st of each year. No additional participation fee will be required other than the initial fee as stated in item #4 unless membership has lapsed for more than 1 year.
8. (a) Participant will also submit a **"Letter of Good Standing"** from the Primary REALTOR® Association for all members of the office (for all licensees authorized to utilize the service). (b) Participant will **submit a copy of all licensee's license in the office.**
9. Participant understands and acknowledges that lockboxes are provided by PACMLS shareholder REALTOR® Associations to their members and are NOT provided by the PACMLS.

Signature of Participant

Date of Application

I, _____, as the Designated Broker of _____, hereby declare that the following named licensees affiliated with this office shall be the authorized Subscribers of the Pacific Regional Multiple Listing Service through the Lower Yakima Valley Association of REALTORS®. I also hereby declare that no other licensees including non-principal brokers, sales associates, or licensed and certified appraisers affiliated with this office shall be authorized to utilize the Service in any way at any time. I agree that unauthorized parties shall not use or borrow copies of Pacific Regional Multiple Listings, will not solicit either sales or listings, and I will promptly notify the Service of any violations and be held liable for any dues or fees I am posed by the Board of Directors of the Service. (Please list additional Licensees on additional page)

LICENSEES AUTHORIZED TO UTILIZE THE SERVICE:

_____	_____	_____
Full Name – Designated Broker	License Number	Signature
_____	_____	_____
Full Name – Licensee	License Number	Signature
_____	_____	_____
Full Name – Licensee	License Number	Signature
_____	_____	_____
Full Name – Licensee	License Number	Signature
_____	_____	_____
Full Name – Licensee	License Number	Signature
_____	_____	_____
Full Name – Licensee	License Number	Signature
_____	_____	_____
Full Name – Licensee	License Number	Signature
_____	_____	_____
Full Name – Licensee	License Number	Signature

DATE: _____ SIGNATURE OF DES. BROKER: _____

TYPED NAME OF BROKER: _____

Declaration of Membership forms shall be required annually and at any time such membership changes for any reason. Please attach additional sheets as necessary.

TO BE COMPLETED BY THE BOARD OF DIRECTORS OF THE SERVICE	
DATE APPROVED: _____	DATE DENIED: _____
SIGNED: _____, PRESIDENT / AUTHORIZED EXECUTIVE	

E-MAIL THIS FORM TO: Belinda@tricityaor.com or FAX to: 509.735.2572