

## **APPLICATION FOR AFFILIATE KEY ACCESS**

CONTACT INFORMAT	ΓΙΟΝ:				
First Name	1	Middle Initial			
Last Name	S	Suffix Jr, III, Sr, Etc.			
Cell Ph:	E	Email:			
COMPANY INFORMATION:					
Office Name:					
Office Address:					
Office Phone:		Cell:			
APPLICANT INFORMATION:					
Are you a current affiliate member of South Bend Area REALTORS®?					
Are you licensed and/or certified?					
Are you insured? Yes No					
If yes, who is your Insurance Company? (Name, Address, and Phone Number)					
Has your membership in a Board of REALTORS® ever been refused, suspended, or terminated?					
(voluntarily or involuntarily) Yes No					
If yes, please provide details:					
Are you or your firm now subject to any bankruptcy or insolvency proceedings? \ Yes \ No					
If yes, please provide details:					
Do you or your firm have any financial problems which could jeopardize those doing business with you?  Yes No					
If yes, please prov	vide details:				
Are there any unresolved complaints, charges or actions against you or your firm by any civil rights agency, consumer protection agency, or any other agency, board or commission?   Yes No					
If yes, please provide details:					
Have you ever been convicted of a felony and/or misdemeanor other than a traffic violation?  Yes No					
If yes, please prov	vide details:				
Are there currently any civil or criminal suits pending against you? Yes No					
If yes, please provide details:					



Are yo	ou or your firm subje	ect to any unpaid judgments?	Yes	No		
If yes,	please provide deta	nils:				
Will b	e doing business in (	(check one or both): St. Jo	seph County	Elkhart County		
		_				
	E LIST 3 MLS PARTICIPA	INT RECOMMENDATIONS IN ST. JO	SEPH COUNTY:	(Broker/Owner, Company, & Signature)		
1.						
2.						
3.						
	I HEREBY APPLY	FOR AFILLIATE KEY ACCESS	IN THE SOUT	H BEND AREA REALTORS®		
I unde	rstand Key Access is	final only upon approval by t	he Board of D	Directors.		
	considered by the M ements and complet		ora Key, an inc	dividual must fulfill the following		
	1) Be an Affiliate Member of the South Bend Area REALTORS®					
	2) Have recommendations/signatures from three (3) MLS Participants. (A Participant is the					
	Principal Broker	r/Owner of a St. Joseph Coun	ty Real Estate	e Company)		
	3) You must be ins	sured and <b>provide a copy</b> of y	your "Certifica	ate of Liability Insurance."		
Applic	ant must also:					
A.	<ol> <li>Submit a one-time non-refundable Keybox Maintenance fee for \$100.00 (payment must be in the form of check or money order made payable to: MLS Key);</li> </ol>					
В.		le by the rules and regulations of the Supra E-Key & Display Key Card/Keybox Lease				
	Agreement;					
C.	Agree to enter into a single Supra Keybox Lease Agreement;					
D.	D. Agree that the information provided above is true and correct.					
Dated:	i	Signature:				