# APPLICATION FOR SECONDARY AFFILIATE KEY ACCESS

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| **Contact Information:** | | | | |
| First Name |  | Middle Initial |  | |
| Last Name |  | Suffix  Jr,  III,  Sr,  Etc. | |  |
| Cell Phone: |  | Email: | |  |
| Home Add: | Street: | City | | State: |
|  |  |  | | Zip: |

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| --- | --- | --- | --- |
| **Company Information:** | | | |
| Office Name: |  | | |
| Office Address: |  | | |
| Office Phone: |  |  |  |

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| **Applicant Information:** | |
| Are you a current affiliate member of South Bend Area REALTORS®?  Yes  No | |
| If no, have you submitted an affiliate application for membership?  Yes  No | |
| 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 there currently any civil or criminal suits pending against you?**  Yes  No | |
| If yes, please provide details: |  |
| **Are you now subject to any unpaid judgments?**  Yes  No | |
| **If yes, please provide details:** |  |
| **Will be doing business in (check one or both):**  St. Joseph County  Elkhart County | |

**I HEREBY APPLY FOR SECONDARY AFILLIATE KEY ACCESS IN THE SOUTH BEND AREA REALTORS®**

I understand Key Access is final only upon approval by the Board of Directors.

To be considered by the MLS Directors to possess a Supra Key, an individual must fulfill the following requirements and complete the application below:

1. Pay a one-time processing fee of $25.00
2. The Primary Affiliate member must approve by signing this application.

**Applicant must also:**

1. Agree to abide by the rules and regulations of the Supra E-Key/Keybox Lease Agreement;
2. Agree that the information provided above is true and correct.

Dated: Signature:

Signature of Primary Affiliate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_