

**HEARTLAND ASSOCIATION OF REALTORS® , INC.
BROKER/APPRaiser/AGENT APPLICATION FOR MEMBERSHIP**

**815 US 27 South, Sebring, FL 33870
Phone 863-385-6014~ Fax 863-385-4944
e-mail sheila@heartlandrealtors.org**

SECTION 1: LICENSEE

Name as shown on license _____

Nickname/DBA _____

Real Estate License # _____ Date License Issued _____

Licensed/Certified Appraiser Yes No Appraisal License # _____

Home Address _____ Mailing address _____

City _____ State _____ Zip _____

e-mail _____ Cell phone # _____

WEB page address _____ Fax # _____

To the Heartland Association of REALTORS®, I hereby apply for REALTOR®/Appraiser Membership in the above named Association and am enclosing my check in the amount of \$ 100.00 for a one time application fee and \$125.00 (pro-rated monthly) for my Dues, payable to Heartland Association of REALTORS®, Inc Application fees are non-refundable. In the event of non-election, dues will be refunded. In the event of my election, I agree to abide by the Code of Ethics of the National Association of REALTORS®, which includes the duty to arbitrate, and the Constitution, Bylaws and Rules and Regulations of the above named Association, the State Association and the National Association. I understand membership brings certain privileges and obligations that require compliance. I understand that I will be required to complete periodic Code of Ethics training as specified in the Association's bylaws as a condition of continued membership.

Signature of Applicant _____

Date _____

NOTE: Applicant acknowledges that if accepted as a Member and he/she subsequently resigns or is expelled from membership in the Association with an Ethics Complaint or Arbitration Request pending, the Board of Directors may condition renewal of membership upon applicant's verification that he/she will submit to the pending Ethics or Arbitration Proceeding and will abide by the decision of the Hearing Panel; or if applicant resigns or is expelled from membership without having complied with an award in Arbitration, the Board of Directors may condition renewal of membership upon his/her payment of the award, plus any costs that have been established previously as due and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.

NOTE: Dues payments to the Heartland Association are not tax deductible as charitable contributions. Portions of such payments may be tax deductible as ordinary and necessary business expenses.

SECTION 2: LICENSEE

I hereby submit the following information for your consideration:

Name, as you want it to appear on MLS Roster _____

Name of Real Estate/Appraisal Firm _____

Office Address _____

State position with firm: Principal Partner Corporate Officer
Branch Office Manager Non-Principal Licensee Majority Shareholder

Company Information State whether: Sole Proprietor DBA Partnership
Corporation LLC

Password for CTI _____(this is for you to determine, and may include letters, numbers or a combination of both)

Do you hold, or have you ever held a real estate license in any other state?

Yes No

If "Yes" please specify state and license #.

Resident in Highlands County since _____

Previous Residence _____

Are you currently a member of any other real estate Association/Board affiliated with the NATIONAL ASSOCIATION OF REALTORS®? Yes No

Name of Association _____ NRDS # _____

Have you/are you participating in another Multiple Listing Service?

Yes No

Name, Where and When?

SECTION 4: LICENSEE

I HEREBY CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT, AND THAT I AGREE THAT FAILURE TO PROVIDE COMPLETE AND ACCURATE INFORMATION AS REQUESTED, OR ANY MISSTATEMENTS OF FACT, MAY BE GROUNDS FOR TERMINATION OF MY MEMBERSHIP IN THE HEARTLAND ASSOCIATION OF REALTORS®, INC.

Signed: _____ Date: _____

Please Print Name Here _____

- Please attach copy of Real Estate License
- Please attach copy of Drivers License

PRORATION OF ASSOCIATION DUES

Association Application and Dues payable to the Heartland Association of REALTORS®, Inc.

Association dues required to join the Heartland Association of REALTORS®, Inc. are composed of three parts: National, State and Local. If an applicant has belonged to another Association during the current year, they may not owe the NAR and/or FAR dues. If you are coming from another board and have paid the dues, please provide a letter of Good Standing. Dues are based on the calendar year.

All figures apply to new applicants only. The pro-ration is based upon the day the applicant makes application, but should be within 30 days of becoming affiliated with a member Broker by licensure with the Florida Real Estate Commission. All fees and dues must accompany the application in order to be processed.

NEW MEMBER ASSOCIATION FEES:

Local Association Application Fee: (ONE TIME) \$ 100.00

Heartland Association of REALTORS®, Inc. (YEARLY DUES) \$ 125.00

The Multiple Listing fees will be billed to your Broker on a monthly basis.

The cost is \$25.00 per agent per month for unlimited listings and MLS user fees.

Heartland Multiple Listing Service
815 US Hwy 27 South Sebring, Florida 33870
Phone 863-385-6014 Fax 863-385-4944
sheila@heartlandrealtors.org

IF THIS IS A NEW OFFICE, PLEASE COMPLETE THIS APPLICATION FOR BROKER/APPRaiser NEW OFFICE MEMBERSHIP AS WELL.

Thank you for your inquiry concerning the Heartland Multiple Listing Service.

The Broker of the Real Estate Company is required to become a member. Each licensee under the Broker is required to be a participant as well. If you are joining as a Branch, kindly send along the occupational license and license from DBPR for that Branch. There are no exceptions.

Kindly complete the attached application and branch certification and return to this office with your check made payable to Heartland Multiple Listing Service. Upon receipt, your application will be processed. The DBPR will be contacted to verify each licensee in the office and packages will be sent to the office for each person, with the By-Laws and Rules and Regulations governing the HMLS. Included in the package will be program disks and instructions on how to install and use CTI. There is also a web based CTI program available for your use.

Along with your completed application and check, kindly sign the bottom of this letter and return as well. Once again, thank you for your interest in our Board and we look forward to being of service to you.

Company information: Sole Proprietor Partnership Corporation LLC (Limited Liability Company)

Office Name: _____

Office Address: _____

Office Mailing Address: _____

Office phone # _____ fax# _____

Office email: _____

Office web page: _____

Your position: Principal Partner Corporate Officer Branch Office Manager

Names of other Partners/Officers of your firm:

Have you ever been refused membership in any other Association of REALTORS®?

Yes No

If yes, please state the basis for each such refusal and detail the circumstances related thereto: _____

Is the Office Address, as stated, your principal place of business?

Yes No

If not, or if you have any branch offices, please indicate and give address:

Have you or your firm been found in violation of state real estate/appraisal licensing regulations within the last three years?

Yes No

If yes, please provide details:

Have you or you firm been convicted, adjudged, or otherwise recorded as guilty by a final judgment of any court of competent jurisdiction of a felony or other crime.

Yes No

If yes, please provide details:

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership if granted.

I further agree that, if accepted for membership in the Association, I shall pay the fees and dues as from time to time established.

NOTE: Payments to the Heartland Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. No refunds.

By signing below I consent that the REALTOR® Associations (local, state, national) and their subsidiaries, if any (e.g., MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address or other means of communication available. This consent applies to changes in contact information that may be provided by me to the Association(s) in the future. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my membership.

MLS NEW OFFICE APPLICATION FEE
ONE TIME \$150.00

The Multiple Listing fees will be billed to the Broker or Appraiser on a monthly basis. The cost is \$25.00 per agent per month for unlimited listings and MLS user fees.

Dated: _____ Signature: _____

Broker Acknowledgement

I have read the conditions concerning membership in the Heartland Multiple Listing Service. The information attached is true and accurate to the best of my knowledge. Failure to comply will result in membership being denied.

Broker

Yours Sincerely,
Sheila Richards
Executive Director