

HARRISONBURG-ROCKINGHAM ASSOCIATION OF REALTORS®

2050 Pro Pointe Lane, Harrisonburg, VA 22801 Phone: (540)433-8855 Fax: (540)433-2881

Eric Hash, Association Executive eric@hrar.com

Jennifer Bettiga, Office Manager <u>staff@hrar.com</u>

MLS Only Membership Application Packet:

- 1. HRAR MLS Only Membership Dues
- 2. HRAR MLS Only Membership Application Form
- 3. HRAR REALTOR® MLS Registration Form

Please Attach the Following with Application

- 1. A copy of the agent's license from DPOR
- 2. A Letter of Good Standing from the Agent's Primary Association
- **3.** All Checks need to be made payable to **HRAR**:
- a. New Firm Fee: If Firm is not already a member of HRAR (Check Payable to **HRAR** by the <u>Firm</u>)
- b. MLS Quarterly Fee: For current billing cycle / Can be prorated (Check Payable to **HRAR** by the Firm)
- c. New MLS Subscriber Fee: One-Time Fee (Check Payable to **HRAR** by the <u>Agent</u>)



HARRISONBURG-ROCKINGHAM ASSOCIATION OF REALTORS® HRAR MLS ONLY MEMBERSHIP DUES

NEW MLS ONLY FIRM FEES:

Application Fee - \$450.00

If your Firm is not currently a member of HRAR, the Firm must join first along with the Broker of the Firm before any Agents can join HRAR's MLS Services.

If your firm is already a member of HRAR, please proceed to the following steps:

MLS FEES

1. MLS Quarterly Fee - \$95.00

*per licensee payable from the Participant (BROKER) on the first day of each quarter.

2. New MLS Subscriber Fee - \$275.00

*This is a One-Time Fee

SPECIAL FEES

Reactivation Fee:

1) If inactive up to 1 year: \$50.00

2) If inactive 1+ years: All one-time fees must be paid

Transfer Processing Fee:

\$30.00



Harrisonburg-Rockingham Association of REALTORS®

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FOR OFFICE USE ONLY: NRDS ID

HRAR REALTOR® Membership Application Form

Phone: 540-433-8855

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Fax: 540-433-2881

Name:	Name	Name		
R.E. License #:	(As Appears On License)	(As It	t Should Appear In the MLS)	
Appraisal License #:	Firm Name:	Branch Of	fice:	
Preferred Mailing Address: Office Address Home Address (Check One) Home Mailing Address: Website: E-Mail Address: Home #: Fax #: Preferred Phone # in MLS Listings: Birth Date: Preferred Phone # in MLS Listings: Birth Date: Please indicate your primary REALTOR® Association if other than HRAR: (If HRAR is NOT your primary Association, please provide a letter of good standing from your primary Association) Do you currently have any pending REALTOR® Code of Ethics violations filed against you? Yes No Have you been in violation of the REALTOR® Code of Ethics in the last three years? Yes No Have you ever been convicted of a felony? (If yes, please explain) Yes No	R.E. License #:	Expiration Date:	Type: Broker Sales	
Home Mailing Address:	Appraisal License #:	Expiration Date:		
E-Mail Address:	Preferred Mailing Address:	Office Address H	ome Address (Check One)	
Mobile #: Home #: Fax #: Preferred Phone # in MLS Listings: Birth Date: Please indicate your primary REALTOR® Association if other than HRAR: (If HRAR is NOT your primary Association, please provide a letter of good standing from your primary Association) Do you currently have any pending REALTOR® Code of Ethics violations filed against you? Yes No Have you been in violation of the REALTOR® Code of Ethics in the last three years? Yes No Have you ever been convicted of a felony? (If yes, please explain) Yes No Yes Yes	Home Mailing Address:			
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EALTOR® Signature: Date:	proved, I agree as a condition of members at I will pay dues when due and will abide ne to time amended. Finally, I consent and ember or other person, and I agree that any	ship to complete the orientation country by the Code of Ethics, Bylaws, As a authorize HRAR to invite and receive information and comment furnished.	rses within 6 months of my approval. I further agree ssociation Policies and duty to arbitrate, all as from eive information and comment about me from any ed to HRAR by any Member or other person in	
	EALTOR® Signature:		Date:	



HRAR REALTOR® MLS Registration Form

Each REALTOR® in the firm who will utilize the MLS must sub- authorized Managing Broker and pay the appropriate fees before	
REALTOR® Name:	·····
Firm Name:	
Section I: Please have your Principal or Authorized Man	naging Broker complete the following.
I,	th the HRAR MLS Rules and Regulations and policies. ARR MLS in any way, including listing a property under a base for any other purpose. MLS Only Subscribers elected with another licensee within the same firm who appears on the listing agreement, signage or other MLS and data base is solely for clerical and administrative erical user is registered. The membership and for the security of their passcodes accode to any unauthorized person. Through my membership, my firm is responsible for son (or from the beginning of the year of first use if the subject to penalties including, but not limited to, a fine as a determined by the HRAR Board of Directors.
Principal or Authorized Managing Broker's Signature	Date
Section II: Requires Applicant Signature I agree as a condition of participation in the MLS to abide by all r including payment of fees. I confirm that I currently, and will on a estate business activities, actively endeavor to list real property of cooperation and compensation made by other Participants through activities during my participation in the MLS. I acknowledge that ongoing basis may result in potential suspension or termination of with the MLS's established procedures.	the type filed with the MLS and/or accept offers or a the MLS. I agree that I must continue to engage in such failure to abide by these conditions of participation on an
Agents Signature	Date
rrisonburg-Rockingham Association of REALTORS®	Phone: 540-433-8855