



Northeast Georgia Board of REALTORS®

Phone: (706) 781 - 3030 - Fax: (706) 781 - 3032

Email: mary@negboard.com or ashleyowens@negboard.com

APPLICATION FOR REALTOR® &/OR MLS **A COPY OF YOUR REAL ESTATE LICENSE POCKET CARD** **MUST BE SUBMITTED WITH YOUR APPLICATION!**

***Note for Board Membership Only:** To the Northeast Georgia Board of REALTORS®, I hereby apply for REALTOR® Membership in the above named Board. 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 Board, the State Association and the National Association. I understand membership brings certain privileges and obligations that require compliance. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements, such as orientation, not be completed within timeframe established in the association's bylaws. I understand that I will be required to complete biennial Code of Ethics training as specified in the association's bylaws as a continued condition of membership.*

***Note:** Applicant acknowledges that if accepted as a member and he/she subsequently resigns from the Board or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon applicant's certification that he/she will submit to the pending ethics proceeding and will abide by the decision of the hearing panel. If applicant resigns or otherwise causes membership to terminate, the duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose while applicant was a REALTOR®.*

APPLICANT'S INFORMATION:

I am applying as a: _____ Salesperson _____ Broker _____ Licensed/Certified Appraiser

I am applying for: _____ REALTOR® & MLS _____ MLS Only Membership _____ REALTOR® Membership Only

Applicant's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Cell Phone #: _____ Date of Birth: _____

Email Address: _____

Real Estate License #: _____

REALTOR® BOARD INFORMATION:

Are you presently a member of another Board/Association of REALTORS®? Yes _____ No _____

If yes, where? _____

(A "Letter of Good Standing" from the above Board/Association will need to be submitted along with your application.)

If you are Active with another Board/Association, select if NEGBOR® is to be your Primary or Secondary Board?

(State & National dues are paid with the Primary Board)

Primary _____ Secondary _____

If you are now or have ever been a REALTOR®, indicate your NAR membership (NRDS)#: _____

Last date (year) of completion of NAR's Code of Ethics: _____

SUPRA KEY INFORMATION:

If you are joining the NEGBOR® MLS & you do not have a Supra key but would like more information about having one issued to you, enter the 4 digit pin # you would like to use here _____.

If you already have a Supra key & would like to have it co-op we need your Key # _____
& Pin # _____. The fee to co-op is \$60.00 a year, prorated September - August.

COMPANY INFORMATION:

Company Name: _____

Broker/Participant's Name: _____

Real Estate License #: _____ NRDS #: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____

I understand that all fees paid to the Northeast Georgia Board of REALTORS® are non-refundable and that it is my responsibility to notify the NEGBOR® office when my email, phone number & address changes.

Applicant's Signature **Date**

It is my responsibility as the Broker/Participant to notify the NEGBOR® office within 30 days of any office changes such as agent transfers, terminations or additions to my company.

Broker/Participant' Signature **Date**

OFFICE USE ONLY

Applicant's Name: _____

NRDS #: _____ Membership Type: Primary Secondary MLS Only
Local & State
Local Only

Company NRDS #: _____ MLS Access: Yes No

Co. MLS Code: _____ MLS UN: _____ Password: _____