

### SECTION I

Applicant shall return to Metropolitan Multi-List, Inc., d/b/a Georgia MLS, 1414 Montreal Road, Tucker, Georgia 30084 the following: a completed Application for Membership in Georgia MLS and payment in the amount of \$100.00 for the first month's prepaid broker dues of \$100.00. Notwithstanding anything to the contrary herein, all parties signing this application, hereinafter collectively referred to as "Applicant", do hereby, jointly and/or severally, personally and/or corporately, promise and agree to pay the charges and fees required by the Rules and Regulations of Georgia MLS. In the event that Applicant fails to pay any such charges or fees as the same become due, Georgia MLS may take such steps as are legally available to it for collection of same. The applicant agrees to pay all costs and expenses incurred by Georgia MLS in connection with the collection of any such sums due, including reasonable attorney fees. Applicant further agrees that if he/she was previously a member of Georgia MLS or managing Broker or Broker in charge of a firm operated by a Participant in Georgia MLS, any unpaid dues, fees or other charges which are due to Georgia MLS as a result thereof, including any attorneys fees, contingent or otherwise, and costs of collection incurred by Georgia MLS, must be paid as a condition precedent to becoming a member of Georgia MLS under this application. Applicant acknowledges that any amounts due Georgia MLS from a prior relationship must be paid in full prior to receiving any future services as a Broker, Associate Broker, or Licensee of another company. Applicant agrees that Georgia MLS has permission to display limited information from all of Applicants listings on the Georgia MLS internet web sites, unless Applicant notifies Georgia MLS to exclude such listings, in writing by certified mail, return receipt requested. Brokers seeking membership in Georgia MLS as Participants will be provided public records and map services only for areas currently receiving such service at the time their application is submitted. Public records are expanded into new counties as growth in Georgia MLS membership dictates. Applicant agrees that if accepted as a member by Georgia MLS, he/she will comply with the Rules and Regulations of Georgia MLS as they may now or in the future exist.

TO: Georgia MLS:

I, \_\_\_\_\_ (Broker's Name) hereby apply for participation in the above named Georgia MLS, and enclose my payment in the amount of \$100.00, which I understand will be returned to me in the event I am not accepted. In the event my application is approved, I agree as a condition of participation to complete the indoctrination course of the above named Georgia MLS, if any, and otherwise on my own initiative to thoroughly familiarize myself with the Georgia MLS Rules and Regulations, including the duty to arbitrate business disputes pursuant to the arbitration procedures of Georgia MLS. I agree to complete satisfactorily a reasonable and nondiscriminatory written examination covering such Rules and Regulations, if required, and duty to arbitrate, and further agree that my act of paying Georgia MLS fees and charges shall evidence my initial and continuing commitment to abide by the aforementioned Rules and Regulations, and duty to arbitrate, all as from time to time may be amended. I consent and authorize Georgia MLS, through its Executive Committee and Board of Directors, to request and receive information and comments about me from any member, person, banking institution, or credit reporting agency. The response to any such invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel, or defamation of character. Finally, I agree that, if accepted for participation in Georgia MLS, I shall pay the fees, dues, fines, and other assessments as from time to time may be established, including any non-Realtor® member fee differential, and I further acknowledge and agree that I am responsible for compliance with the Georgia MLS Rules and Regulations for all persons affiliated with my firm.

NOTE: Applicant acknowledges that if accepted as a Participant and he/she subsequently resigns or is expelled from participation in the Georgia MLS with an arbitration request pending, renewal of participation may be conditioned upon applicant's verification that he/she will submit to the pending arbitration proceeding and will abide by the decision of the Hearing Panel; or if applicant resigns or is expelled from participation without having complied with an award in arbitration, renewal of participation may be conditioned upon his/her payment of the award, plus any costs that have previously been established as due and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.

I hereby submit the following information for your consideration:

NAME OF FIRM: \_\_\_\_\_  
(Please Print)

d/b/a: \_\_\_\_\_  
(Please Print)

Name of Broker: \_\_\_\_\_  
(Please Print)

Broker License Number: \_\_\_\_\_

Office Street Address: \_\_\_\_\_  
(Street Number, Street Name, Suite/Apartment Number, etc.)

\_\_\_\_\_  
(City) (County) (State) (Zip)

Office Mailing Address: \_\_\_\_\_  
(Street Number, Street Name, Suite/Apartment Number, etc.)

\_\_\_\_\_  
(City) (State) (Zip)

Office Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Office Email: \_\_\_\_\_ Office Website: \_\_\_\_\_

Corporate Tax I.D. Number: \_\_\_\_\_ RE Commission Firm Number: \_\_\_\_\_

Check whether: Sole Proprietor    DBA    Partnership    Corporation    LLC

## SECTION II

State the names and titles of all principals, partners, or corporate officers of your firm:

\_\_\_\_\_  
(Name) (Title) (License No.)

\_\_\_\_\_  
(Name) (Title) (License No.)

\_\_\_\_\_  
(Name) (Title) (License No.)

\_\_\_\_\_  
(Name) (Title) (License No.)

\_\_\_\_\_  
(Name) (Title) (License No.)

Is the office address, as stated in Section I, your principal place of business? Yes    No

List the name and address of all branch offices or other real estate firms, in which you are a principal, partner or corporate officer within the jurisdiction of Georgia MLS; (State of Georgia and contiguous States)\*:

|             |                      |
|-------------|----------------------|
| _____       | _____                |
| (Firm Name) | (Title)              |
| _____       | _____                |
| (Address)   | (City) (State) (Zip) |
| _____       | _____                |
| (Firm Name) | (Title)              |
| _____       | _____                |
| (Address)   | (City) (State) (Zip) |

**Business and Credit References**

Bank:

General Account: \_\_\_\_\_

|                |                  |
|----------------|------------------|
| (Name of Bank) | (Account Number) |
|----------------|------------------|

Escrow Account: \_\_\_\_\_

|                |                  |
|----------------|------------------|
| (Name of Bank) | (Account Number) |
|----------------|------------------|

Others: \_\_\_\_\_

|                |                  |
|----------------|------------------|
| (Name of Bank) | (Account Number) |
|----------------|------------------|

Are you or is any real estate firm in which you are a sole proprietor, general partner or corporate officer involved in any pending bankruptcy or insolvency proceedings or have you or any real estate firm in which you are a sole proprietor, general partner or corporate officer been adjudged bankrupt in the past three (3) years? Yes No

If yes, specify the place(s) and date(s) of such action, and detail the circumstances relating thereto.\*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOTE: Applicant acknowledges that if the applicant or any real estate firm in which the applicant is a sole proprietor, general partner, or corporate officer is involved in any pending bankruptcy or insolvency proceedings or has been adjudged bankrupt in the past three (3) years, the Georgia MLS may require as a condition of participation that the bankrupt applicant pay cash in advance for Georgia MLS fees for up to one (1) year from the date that participation is approved or from the date that the applicant is discharged for bankruptcy (whichever is later) or, in the event that bankruptcy proceedings are initiated subsequent to obtaining participation in the Georgia MLS, that the Participant may be placed on a "cash basis" from the date that bankruptcy is initiated until one (1) year from the date that the Participant has been discharged from bankruptcy.

Do you hold, or have you ever held, a real estate license in any other state? Yes No

If so, specify: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Has your real estate license, in this or any other state, been suspended or revoked? Yes No

If "Yes", specify the place(s) and date(s) of such action, and detail the circumstances relating thereto.\*

\_\_\_\_\_  
\_\_\_\_\_

Are there now any pending or unresolved complaints, or have there been in the past 3 years, any complaints against you or the firm with which you have been associated before any state real estate regulatory agency or any other agency of government? Yes No

If "Yes", specify the substance of each complaint in each state, the agency before which complaint was made, and the current status or resolution of such complaint.\*

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Have you ever been convicted of a felony? Yes No

If so, give details including state of court of conviction.\*

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Although not required for membership in Georgia MLS, do you currently belong to a Board of Realtors®?

Yes No

If so, which Board of Realtors® : \_\_\_\_\_

Is your firm a member of any other Multiple Listing Service? Yes No

If so, specify (include Broker code/Account Number assigned for each)\*:

| (MLS Name) | (Broker Code/Account Number) |
|------------|------------------------------|
| _____      | _____                        |
| (MLS Name) | (Broker Code/Account Number) |

How many Licensees are affiliated with your firm? \_\_\_\_\_

How long has your firm been active in the real estate business? \_\_\_\_\_

*\*Attach separate sheet(s) as necessary.*

### SECTION III

(Applicant must sign)

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, may be grounds for revocation of my membership if granted.

Please indicate title beside signature (i.e. - Partner, Owner, Officer, etc.).

\_\_\_\_\_  
(Firm Name)

By: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature) (Title)

Broker must sign on indicated line acknowledging his/her role as Participant in Georgia MLS upon approval of this application.

By: \_\_\_\_\_ Date: \_\_\_\_\_  
(Broker Signature)

## BROKER CERTIFICATION OF LICENSEES

List below all Licensees affiliated with your firm, including, but not limited to, Brokers, Associate Brokers, Salespersons, Auxiliary personnel, and any other Licensees, whether "actively working" or not, or the license is just being "held" or "stored". This list will be verified monthly against the Georgia Real Estate Commission records, and a fine of \$50.00 will be assessed to the Participant for each licensee omitted or each licensee added without a valid real estate license. This shall certify the following is a complete list of the licensees affiliated with my firm as of this date.

\_\_\_\_\_  
(Print Firm Name) \_\_\_\_\_  
(Company Phone Number)

Name: \_\_\_\_\_ License Number: \_\_\_\_\_  
(Please Print, First, Middle, Last) (Real Estate License)

Home Address: \_\_\_\_\_  
(Number, Street, Apartment Number, etc.)

\_\_\_\_\_  
(City) (State) (Zip)

Telephone Numbers: Primary: \_\_\_\_\_ Secondary: \_\_\_\_\_

FAX: \_\_\_\_\_ Email: \_\_\_\_\_

(List Licensees, Office Managers and Secretaries below. Indicate office manager or secretary status beside name. Reproduce and attach additional sheets if necessary. All licensees with Broker's firm must be reported, including broker, associate brokers, salespersons and any other affiliates holding a real estate license in Georgia.)

### LICENSEE/STAFF PROFILE

Name: \_\_\_\_\_ License Number: \_\_\_\_\_  
(Please Print, First, Middle, Last) (Real Estate License)

Home Address: \_\_\_\_\_  
(Number, Street, Apartment Number, etc.)

\_\_\_\_\_  
(City) (State) (Zip)

Telephone Numbers: Primary: \_\_\_\_\_ Secondary: \_\_\_\_\_

FAX: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ License Number: \_\_\_\_\_  
(Please Print, First, Middle, Last) (Real Estate License)

Home Address: \_\_\_\_\_  
(Number, Street, Apartment Number, etc.)

\_\_\_\_\_  
(City) (State) (Zip)

Telephone Numbers: Primary: \_\_\_\_\_ Secondary: \_\_\_\_\_

FAX: \_\_\_\_\_ Email: \_\_\_\_\_

## LICENSEE/STAFF PROFILE

|   |  |                  |
|---|--|------------------|
| Name: _____<br>(Please Print, First, Middle, Last)              | License Number: _____<br>(Real Estate License) |                  |
| Home Address: _____<br>(Number, Street, Apartment Number, etc.) |  |                  |
| _____   | _____  | _____            |
| (City)  | (State)  | (Zip)            |
| Telephone Numbers: Primary: _____                               |  | Secondary: _____ |
| FAX: _____  | Email: _____                                   |                  |

|   |  |                  |
|---|--|------------------|
| Name: _____<br>(Please Print, First, Middle, Last)              | License Number: _____<br>(Real Estate License) |                  |
| Home Address: _____<br>(Number, Street, Apartment Number, etc.) |  |                  |
| _____   | _____  | _____            |
| (City)  | (State)  | (Zip)            |
| Telephone Numbers: Primary: _____                               |  | Secondary: _____ |
| FAX: _____  | Email: _____                                   |                  |

|   |  |                  |
|---|--|------------------|
| Name: _____<br>(Please Print, First, Middle, Last)              | License Number: _____<br>(Real Estate License) |                  |
| Home Address: _____<br>(Number, Street, Apartment Number, etc.) |  |                  |
| _____   | _____  | _____            |
| (City)  | (State)  | (Zip)            |
| Telephone Numbers: Primary: _____                               |  | Secondary: _____ |
| FAX: _____  | Email: _____                                   |                  |

|   |  |                  |
|---|--|------------------|
| Name: _____<br>(Please Print, First, Middle, Last)              | License Number: _____<br>(Real Estate License) |                  |
| Home Address: _____<br>(Number, Street, Apartment Number, etc.) |  |                  |
| _____   | _____  | _____            |
| (City)  | (State)  | (Zip)            |
| Telephone Numbers: Primary: _____                               |  | Secondary: _____ |
| FAX: _____  | Email: _____                                   |                  |