## ® APPLICATION FOR NEW OFFICE/ REALTOR® MEMBERSHIP

Return application to 84 Clark Blvd., Tupelo, MS 38804 or <a href="mailto:nemsbd@bellsouth.net">nemsbd@bellsouth.net</a>. During the next 30 days you MUST take the free New Member Code of Ethics online course at <a href="https://www.realtor.org">www.realtor.org</a> and provide confirmation to the Board office.

| am enclosing my check in the amount of fee, and \$ for my Primary  My application fee will be returned in the In the event of my election, I a  Bylaws and Rules and Regulations of the Board's orientation class. I consent that to comment about me from any member or response to the invitation shall be conclusted character. I understand membership bring Membership is provisional and indicated in the Bylaws.  Note: Applicant acknowledge membership to terminate with an ethics of certification that he/she will submit to the standard in the she will submit to the standard in the standard in the she will submit to the standard in the sta | for a one time or Secondary (circle one) De event of non-election. gree to abide by the Code of the above named Board, the Statche Board, through its Member other person. I further agree to sively deemed to be privileged ges certain privileges and oblight may be revoked should compass that if accepted as a member complaint pending, the Board et pending ethics proceeding at te, the duty to submit to arbitrant was a REALTOR®. | new company set-up for ues payable to the North Lethics of the National A te Association and the North Committee or other that any information and the department of the term | such as the orientation, not be completed within times ly resigns from the Board/Council or otherwise causes tion renewal of membership upon applicant's ision of the hearing panel. If applicant resigns or t even after membership lapses or is terminated, |  |
|---|---|---|---|--|
| Name:   | Off   | ice Name:   |   |  |
|   |   |   | Appraisal License#:   |  |
| Office Address:   |   |   |   |  |
| Office Phone:   | Fax:  | 1   | E-Mail:   |  |
| Residence Address:  |   |   |   |  |
| Phone:  | Fax:  | E-Mail:   | <u> </u>  |  |
| Do you hold yourself out to the general p   | oublic as being actively engag  | ged in the real estate bus  | iness?  |  |
| Date of Birth:  |   | Last 4 digits o   | f SS#   |  |
| ighest level of education completed:  |   |   |   |  |
| Have you been engaged continuously in the business since then   |   | ? If not, what years in RE?   |   |  |
| In what other business have you been en   | gaged?  |   |   |  |
| Are you now employed or in any other b  | usiness?  | If yes, where?  |   |  |
| How long with current real estate firm?   | <del> </del>  | Previous RE firm (if app  | plicable):  |  |
|   |   |   | If yes, name the Board/Council and list the   |  |
| type of membership held:  |   |   |   |  |
|   |   |   | name the Board/Council and the type of membership   |  |
| held:   |   |   |   |  |
|   |   |   | sociation of REALTORS® in the past three (3) years o  |  |
| are there any such complaints pending?  |   | -   |   |  |
|   |   |   |   |  |
| Are you a designated broker or branch   | h manager?  | (If yes, you m  | ust also complete 2 <sup>nd</sup> page of this application.)  |  |
| information as requested, or any misstate accepted for membership in the Board, I   | ement of fact, shall be ground<br>shall pay the fees and dues as<br>® are not deductible as charita   | s for revocation of my n<br>s from time to time estab   | that failure to provide complete and accurate<br>nembership if granted. I further agree that, if<br>blished. <b>NOTE:</b> Payments to the Northeast<br>payments may, however, be deductible as an   |  |
| Dated:  | Signature:  |   |   |  |

## APPLICATION FOR REALTOR® MEMBERSHIP: PAGE 2 FOR DESIGNATED BROKERS/BRANCH MANAGERS

| Does your office comply with zoning requirements for its location? |   |   |   |   |  |
|--|---|---|---|---|--|
| Company information:<br>Your position:                             | IndividualDBA PrincipalPartnerIndependent Contractor  | Corporate Officer                                   | CorporationTrusteeOther:  |   |  |
|  | rs/Officers/Trustees of your firm: _  |   |   |   |  |
| Have you ever been refused<br>If yes, state the basis for each     | I membership in any other real estatch such refusal and detail the circum   | e Board/Council? Yesnstances related thereto:_      | No  |   |  |
| Is the Office Address, as sta<br>If not, or if you have any br     | ated, your principal place of busines<br>anch offices, please indicate and give   | s? Yes No<br>ye address:                            |   |   |  |
| In what areas of real estate                                       | do you specialize?  |   |   |   |  |
|  | ntion in which you maintain your eso  |   |   |   |  |
| Do you hold, or have you e   | ver held, a real estate license in any  | other state? Yes 1                                  |   |   |  |
|  | found in violation of state real esta   |   |   |   |  |
| a felony or other crime? Ye  | convicted, adjudged, or otherwise res No  |   |   |   |  |
| I am responsible for the fo  | ollowing agents:  |   |   |   |  |
| 1  | 2   |   | 3   |   |  |
| 4  | 5   |   | 6   |   |  |
| 7  | 8   |   | 9   |   |  |
| 10   | 11  |   | 12  |   |  |
| 13   | 14  | 1   | 15  |   |  |
| information as requested, or for membership in the Boar            | egoing information furnished by me r any misstatement of fact, shall be gd, I shall pay the fees and dues as frictible as charitable contributions. S | grounds for revocation of om time to time establish | my membership if granted. I funded. <b>NOTE:</b> Payments to the No | rther agree that, if accepted ortheast Mississippi Board of |  |
| Dated:   | Signatu   | ıre:  |   |   |  |