UNLICENSED ASSISTANT APPLICATION

ALL APPLICATIONS MUST INCLUDE A READABLE COPY OF AN ASSISTANT DRIVER'S LICENSE AND THIS COMPLETED FORM WITH BROKER AND UNLICENSED ASSISTANT SIGNATURE

BROKER INFORMATION

BROKER Name:_____ Firm MLS ID:_____
(PLEASE USE COMPLETE 9-digit #)

BROKER FIRM
Address:_____
Street/P.O./Apt **City** **State** **Zip**

Brokers E-Mail:_____ (Assistant ID and Password will be sent to Broker ONLY)

UNLICENSED ASSISTANT INFORMATION ☐ Activate ☐ Delete ☐ Transfer ☐ Reinstate

☐ New Assistant (Agent) ☐ New Assistant (Broker/Office) ☐ New Assistant (CompanyWide Access to all Offices)

Assistant Name:_____ Assistant E-Mail_____

Home Address: _____
Street/P.O./Apt City State Zip

(Required to verify against DBPR records-Assistant CANNOT have an active FL Real Estate License or an Appraiser License)

(If Applicable) Agent Name they will be assisting: _____ _____ Agent MLS ID_____
(PLEASE USE COMPLETE 9-digit #)

☐ MFRMLS will invoice the Brokers $99 Annually for each Assistant they have in their Firm. (10/2011 to 9/2012)
No refunds of unused assistant fees during billing year, but can be applied to new assistant once new assistant has paid the $65 registration fees (must be during the current billing year to apply)

If you join in this month you will pay	Assistant Set-Up Fee New Account (Includes a $15 Security setup fee)	MFRMLS & LSC Assistant Fee	Total
Jan 1/Jan 31	$65.00	$74.25	$139.25
Feb 1/Feb 28	$65.00	$66.00	$131.00
Mar 1/Mar 31	$65.00	$57.75	$122.75
Apr 1/Apr 30	$65.00	$49.50	$114.50
May 1/May 31	$65.00	$41.25	$106.25
Jun 1/Jun 30	$65.00	$33.00	$98.00

If you join in this month you will pay	Assistant Set-Up Fee New Account (Includes a $15 Security setup fee)	MFRMLS & LSC Assistant Fee	Total
Jul 1/Jul 31	$65.00	$24.75	$89.75
Aug 1/Aug 31	$65.00	$16.50	$81.50
*Sept 1/Sept 30	$65.00	$107.25	$172.25
Oct 1/Oct 31	$65.00	$99.00	$164.00
Nov 1/Nov 30	$65.00	$90.75	$155.75
Dec 1/Dec 31	$65.00	$82.50	$147.50

*Includes (13) months of service

MFRMLS charges MLS Assistants $99 per year. They bill from October 1st to September 30th the following year.

PAYMENT METHOD: ☐ Check # _____ ☐ MasterCard ☐ VISA ☐ AMEX

Card # _____ **Exp. Date**_____/____

Total Paid or Charged to Credit Card: $_____

Name: **(Exactly as printed on card):**_____

Signature of Cardholder: _____

Office Use Only
SAR Member #: _____
User ID: _____
Password: _____
Date Enter/Paid: ____/____/___

SIGNATURES (BE SURE TO INCLUDE COPY OF ASSISTANT DRIVER'S LICENSE WITH THIS FORM)

Broker Signature _____ **Date** ___/___/___

Assistant Signature _____ **Date** ___/___/___

PLEASE FAX BACK TO SAR: 941-923-0191