

SEVRAR | 1733 E. Northrop Blvd. | Chandler, AZ 85286 | Tel: 480-833-7510 | www.sevrar.com

NRDS#

MLS AGENT ID #

For Office Use Only

Office NRDS #

Office MLS ID #

1. TYPE OF MEMBERSHIP

- A. Primary Membership B. Secondary Membership C. Complimentary

2. PRIMARY FOCUS IN REAL ESTATE

- A. Residential B. Commercial C. Property Management

REAL ESTATE WILL BE:

- A. Full Time B. Part Time

3. APPLICANT'S OFFICE INFORMATION (Must be filled out completely by the applicant.)

Company Business Name *(Must match ADRE)*

Company RE License Number *(MUST BE INCLUDED)*

Physical Company Address *(Must match ADRE)*

Suite #

City

State

Zip

Company Telephone *(Must match ADRE)*

Company Fax

Company Email *(Required by NAR)*

Website

Company Mailing Address Different: Yes No If yes,

Mailing Address

Suite #

City

State

Zip

Date first entered the real estate business: _____ Date first licensed in this State: _____

How many years have you been active as a Broker: _____

Have you participated in a Multiple Listing Service (MLS)? Yes No If yes, where? _____

Do you hold, or have you ever held a real estate license in any other state? Yes No If so specify: _____

Have you ever held a membership in any other Real Estate Board / Association? Yes No If yes, where/when? _____

Have you ever been refused membership in any other Real Estate Board / Association? Yes No If yes, state the basis for each such refusal and detail the circumstances related thereto: _____

Has your real estate license, in this or any other state been suspended or revoked? Yes No If yes, state the basis: _____

Do you have any unsatisfied discipline pending for violation of the Code of Ethics? Yes No If yes, specify: _____

Are there now, or have there been within the past five years, any complaints against you or your firm with which you have been associated before any state 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 the complaint was made, and the current statues or resolution of such complaint:

Within the last ten years, have you been: 1) convicted of a crime punishable by death or imprisonment in excess of one year or 2) been released from confinement imposed for that conviction?

Yes No If yes, specify: _____

2. APPLICANT'S PERSONAL INFORMATION

Full Name As Shown on License (First, Middle, Last)

Nickname *(Approved by ADRE)*

Home Address *(Required by NAR)*

Personal Email *(Required by NAR)*

City

State

Zip

Home Telephone

Home Fax

Mobile Telephone

RE License No. *(Must be Included)*

Languages Spoken

Male Female

DOB (mm/yyyy)

Sex

Preferred Phone *(Required by NAR)*

I, _____, hereby apply for Designated REALTOR® with the SouthEast Valley Regional Association of REALTORS®, and enclose my payment in the amount of \$_____, 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 to membership to complete the indoctrination courses of the SouthEast Valley Regional Association of REALTORS®, and otherwise on my initiative to thoroughly familiarize myself with the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS® including the duty to arbitrate business disputes in accordance with the Code of Ethics and Arbitration Manual of the SouthEast Valley Regional Association of REALTORS® and Constitutions, Bylaws and Rules and Regulations, of the SouthEast Valley Regional Association of REALTORS®, the State Association and the National Association. I further agree that my act of paying dues shall evidence my initial and continuing commitment to abide by the aforementioned Code of Ethics, Constitutions, Bylaws, Rules and Regulations, and duty to arbitrate, all as from time to time amended. Finally, I consent and authorize the SouthEast Valley Regional Association of REALTORS® through its Board of Directors to invite and receive information and comments about me from any member or other person, and I agree that any information and comment furnished to the SouthEast Valley Regional Association of REALTORS® by any Member or other person in response to any such invitation shall be conclusively deemed to be privileged and not from the basis of any action by me for slander, libel, or defamation of character. NOTE: Applicant acknowledges that if accepted as a Member and he/she subsequently resigns or is expelled from membership in the SouthEast Valley Regional Association of REALTORS® with an ethics complaint or arbitration request pending, the Board of Directors may condition renewal of membership upon applicant's verification that he/she will submit to the pending ethics or arbitration proceeding and will abide by the decision of the Hearing Panel; or if applicant resigns or is expelled from membership without having complied with an award in arbitration, the Board of Directors may condition renewal of membership upon his/her payment of the award, plus any costs that have previously been established as dues and payable in relation thereto, provided that the award and such costs have not, in the interim been otherwise satisfied.

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, shall be grounds for revocation of my membership, if granted. I agree that, if accepted for Membership in the Association, I shall pay the fees and dues as from time to time established.

Signature

Date

PAYMENT FORM - SEVRAR DUES

For Office (SEVRAR) Use Only

Payment Received: Credit/Charge (See Below) Check: # _____

Print Name _____

Billing Zip Code _____

Card Number _____

Exp. Date _____

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Signature _____

CSC (Card Security Code) _____

Local Dues (SEVRAR) \$ _____

RAPAC Investment* \$ _____

State Dues (AAR) \$ _____

DR Office Setup Fee \$250.00

National Dues (NAR) \$ _____

Application Fee \$ 95.00

NAR Assessment \$ _____

Payment Type:

American Express

Discover

MasterCard

Visa



TOTAL PAYMENT

\$