

**COPY OF REAL ESTATE
LICENSE REQUIRED**



**SOUTHLAND REGIONAL
ASSOCIATION OF REALTORS® INC.**



REAFFILIATION

REALTOR®

RESPONSIBLE BROKER

MLS ENROLLE

When a Responsible REALTOR®/MLS Broker accepts the affiliation of a severed but otherwise in good standing REALTOR®/MLS member, this form must be submitted to the Association not later than 7 days of said affiliation, accompanied by the reaffiliation fee of \$25.00.

Membership # _____

(Please print or type)

Name of Licensee: _____

Home Address of Licensee: _____ City: _____ Zip: _____

Office Phone: _____ Home Phone: _____
(Identification Number)

Cell Phone: _____ Email Address: _____
Address City Zip

CalBRE License# _____ Exp. _____ Date of Reaffiliation: _____

The above licensee will be located at: _____

- Licensee has been informed that they may LEASE a new Electronic Keypad upon processing of this paperwork in accordance with the Association/MLS rules.
- Licensee has been informed that their currently owned Electronic Keypad may be reactivated upon processing of this paperwork in accordance with the with the Association/MLS rules.

Date: _____ Responsible REALTOR®S Signature/MLS Broker _____

Firm Name: _____

Firm Number: _____

For Association Use Only

**MLS
PART.**

Member Number: _____ Firm Number _____

Bank ABA Number: _____ Check Number: _____ Amount: \$25.00 _____