



MONMOUTH COUNTY ASSOCIATION OF REALTORS®, INC.



One Hovchild Plaza, 4000 Route 66
Tinton Falls, NJ 07753
Phone 732-918-1340 • Fax 732-918-1906
www.momls.com

BRANCH OFFICE APPLICATION FOR MULTIPLE LISTING SERVICE MONMOUTH AND OCEAN COUNTY OFFICES

Thank you for your inquiry and interest in joining the Monmouth/Ocean Multiple Listing Service. Please complete and return the following:

1. Office Membership Application for Monmouth/Ocean Multiple Listing Service which includes:
 - Completed Application
 - Branch application fee of \$50.00
 - Bi-annual fee for office Broker (Call Association office for fee amount).
2. Agency Status Report.
3. Letter from Primary Board stating Local, State and National dues are current for the Broker and all licensees within the agency.
4. Copy of Real Estate license for both Broker and Office.

**THE BROKER IS RESPONSIBLE TO PAY FEES FOR ALL LICENSEES IN THE OFFICE
(CALL ASSOCIATION OFFICE FOR FEE AT TIME OF APPLICATION)**

All licensees must complete the Associate Application in order to receive their Computer ID# and have access to the computer. If applications are not completed, agent will remain as a non-member until completed and returned to association office with a letter of good standing.

The office should have the following:

1. An applicant shall have permanently displayed in their office the license certificates of the Broker of Record and all licensed persons in their employ.
2. An applicant's maintained place of business shall have conspicuously displayed on the exterior of their office the Broker's name and the words "Licensed Real Estate Broker".

If you have any questions, please the Membership Secretary at the Association Office.

Thank You,

Membership Department



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BROKER OF RECORD APPLICATION FOR MONMOUTH/OCEAN MULTIPLE LISTING SERVICE

I, the undersigned member of the Monmouth County Association of REALTORS®, hereby make application for membership in the Monmouth County Multiple Listing Service, a service of the Board, and enclose my check in the amount of \$500.00, in accordance with Article IV, Section 2 of the Monmouth County Association of REALTORS®, Rules and Regulations.

BROKER OF RECORD: _____ Lic. _____

FIRM NAME: _____

ADDRESS: _____
(STREET) (CITY AND STATE) (ZIP)

PHONE: _____ FAX: _____

E-MAIL ADDRESS: _____

**ALL SALES ASSOCIATES/BROKERS MUST BE LISTED ON THE ATTACHED AGENCY STATUS REPORT.
THE BROKER IS RESPONSIBLE TO PAY FOR ALL SALES ASSOCIATES/BROKERS THAT HANG THEIR LICENSE
IN THE OFFICE.**

I am applying for membership in Monmouth/Ocean Multiple Listing Service, I hereby waive all claims against the Monmouth County Association of REALTORS®, its Officers and Directors and any and all members arising out of any act in connection with this application. I hereby affirm that I will abide by the Rules and Regulations of the Monmouth County Association of REALTORS® and will be personally responsible for the payment of all dues and fees incurred by me.

DATE

BROKER OF RECORD SIGNATURE



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AGENCY STATUS REPORT

NAME OF AGENCY: _____ Lic #: _____

ADDRESS OF AGENCY: _____

PHONE: _____ FAX: _____

E-MAIL ADDRESS: _____

BROKER OF RECORD: _____ Lic #: _____

NAME OF OFFICE MANAGER: _____ Lic #: _____

FORM OF ORGANIZATION:

() SOLE PROPRIETORSHIP () PARTNERSHIP () CORPORATION

IF PARTNERSHIP, LIST PARTNERS:

IF CORPORATION, LIST OFFICERS:

AGENCY FEDERAL TAX ID # / SOCIAL SECURITY # OF BROKER OF RECORD: _____

I CERTIFY THE ABOVE STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS ALSO AUTHORIZES ANY DESIGNATED REPRESENTATIVE OF THE MONMOUTH COUNTY ASSOCIATION OF REALTORS® TO VERIFY THIS INFORMATION.

DATE

BROKER OF RECORD SIGNATURE



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APPLICATION FOR MONMOUTH/OCEAN MULTIPLE LISTING SERVICE

I hereby apply for participation in the Monmouth/Ocean Multiple Listing Service and agree to abide by the Rules and Regulations of the Monmouth County Association of REALTORS®. I hereby, irrevocably, waive any and all claims against the Association, its Officers, Directors or Members for any act in connection with the business of the Multiple Listing Service of the Association and particularly as to its or their acts in electing or failure to elect, advancing, suspending, expelling or otherwise disciplining me as a participant of the Multiple Listing Service.

NAME: _____ SOCIAL SECURITY#: _____

RESIDENCE ADDRESS: _____
(Street) (CITY AND STATE) (ZIP)

HOME PHONE: _____ EMAIL ADDRESS: _____

N.J. REAL ESTATE LICENCE No. _____ () Broker () Salesperson

NAME OF FIRM: _____ BUSINESS PHONE: _____

BUSINESS ADDRESS: : _____
(Street) (CITY AND STATE) (ZIP)

Are you a United States citizen? _____

Has a complaint ever been lodged against you with the New Jersey Real Estate Commission? _____

Are you under indictment now? _____

Has a real estate license ever been refused you in this or any other state? _____

Have you ever had a real estate license revoked or suspended? _____

DATE

APPLICANT SIGNATURE

I, _____, am the employing Licensed Real Estate Broker of the above applicant. I certify that he/she will be fully trained and familiarized with the Real Estate License Act, and the Rules and Regulations of the Multiple Listing Service of the Monmouth County Association of REALTORS®, prior to being permitted to show, list or sell property of any kind.

DATE

EMPLOYING BROKER SIGNATURE



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Payment Information & Check List

Please include with your application

- Completed applications with SIGNATURES*
- Letters of Reference (if applicable)*
- Letter of Good Standing (if applicable)*
- Acceptable form of payment: Check or Credit Card*

Please make checks payable to Monmouth County Association of REALTORS®

Name _____

Credit Card Information: ____ VISA ____ MC ____ AMEX

Card # _____ Exp. Date: _____

Amount Paid: \$ _____ Signature: _____

NOTE: All necessary paperwork (*with signatures*) along with your payment, must be submitted together.
The omission of any documentation WILL delay the processing of your application.