

# East Bay Regional Data Multiple Listing Service Clerical/Administrator Subscriber

Revised 10/27/08

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## New Clerical/Administrator Information

### Make sure these items are included when you mail or fax your application:

- Application Form completed and signed by Clerical/Administrator and the MLS Participating Broker.
- \$120 Annual Subscriber fee.

Fees can be charged to Mastercard or Visa by completing the bottom of the form. There is a \$25 service charge for any returned check or refused charge. If a check is returned or a charge refused, payment must be made by postal money order or certified check.

### Reminder:

- You have 45 days to complete a training course for the MLS computer system.
- Go online to our web site at [www.ebrdi.com](http://www.ebrdi.com) to check class schedules, register for a class, and get driving directions to class locations. Call EBRD @ 925 363-2333 with any questions
- You must be affiliated with the same Service Center as your Broker.

### Service Center Locations

<u>Antioch</u>	<u>Berkeley</u>	<u>Oakland</u>	<u>Richmond</u>	<u>Walnut Creek</u>
Delta Association of REALTORS®	Berkeley Association of REALTORS®	Oakland Association of REALTORS®	W Contra Costa Association of REALTORS®	East Bay Regional Data
3428 Hillcrest Ave., Ste 200 Antioch, CA 94531 925 757-8283 925 757-8393 – fax	1553 M L K Jr. Way Berkeley 94709 510 848-4288 510 848-2439 - fax	1528 Webster St Oakland 94612 510 836-3045 510 272-0661 - fax	423 46 <sup>th</sup> Ave Richmond 94805 510 233-1152 510 231-0243 - fax	1000 Burnett Ave. Ste 250 Concord 94520 925 363-2330 925 687-7099 - fax

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**To ADD a new Clerical/Administrator to your company**

1. First Name: \_\_\_\_\_ Last: \_\_\_\_\_
2. Company Name: \_\_\_\_\_
3. Company Address: \_\_\_\_\_
- City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
4. Company Phone: (\_\_\_\_\_) \_\_\_\_\_ Your Extension: \_\_\_\_\_
5. E-mail address: \_\_\_\_\_ and/or Web Page \_\_\_\_\_

Please sign here, thereby giving EBRD permission to send important communication regarding the MLS to your email address above. EBRD will never sell or use this email address for any other purpose than to send important communication directly to you. Signature: \_\_\_\_\_

6. I would like any faxes sent to my: Office \_\_\_\_\_ E-Mail \_\_\_\_\_
- No Refund: I understand that if this application is canceled or withdrawn I will not be entitled to a refund.
  - I acknowledge receipt of a copy of the Rules and Regulations of the EBRD MLS, and agree to abide by such Rules and Regulations as they exist and as they may from time-to-time be amended.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Clerical/Administrator)

I hereby certify that the above Clerical/Administrator is affiliated with me.

Broker Name (Print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(MLS Participating Broker)

**Return completed and signed form to Service Center.** Amount Enclosed \$ \_\_\_\_\_

**For Credit Card Payment Only**

I authorize EBRD to charge my credit card (below). I understand that::

- 1) Should my credit card company "decline" the request for payment, I will be assessed a \$25 fee and be contacted to arrange for an alternate form of payment.
- 2) More than one decline will cause EBRD to cancel this authorization.

MC/VISA Account # \_\_\_\_\_ Exp Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Total \$ \_\_\_\_\_

\_\_\_\_\_  
(Signature)

Service Center Use Only

Clerical/Administrator Code \_\_\_\_\_ Office Code \_\_\_\_\_