MICHIGAN RECIPROCAL ALLIANCE GUEST DATA ACCESS APPLICATION

RECIPROCAL GUEST ACCESS TO THE MLS DATABASES OF MEMBER ASSOCIATIONS TO THE MICHIGAN RECIPROCAL ALLIANCE IS AN ASSOCIATION BENEFIT OF MEMBERSHIP. MLS OF CHOICE OR MLS ONLY MEMBERS ARE NOT ELIGIBLE FOR RECIPROCAL GUEST ACCESS.

Print this form and complete information requested. EMAIL it to the appropriate EMAIL ADDRESS listed below. Your REALTOR® membership status will be confirmed by a member of staff you are making application for access with. Upon confirmation of membership in good standing, you will be notified that you are set up for access with instructions and receive a temporary password by email directly from the database. You must log in into the database using the temporary password within 24 hours of receiving it. Requirements: You must be a primary or secondary Member in good standing of a Michigan Reciprocal Alliance Member Board and MLS. Access and use is subject to the terms of the Michigan Reciprocal Alliance Agreement and individual Board and MLS policy for Reciprocal Access.

BOARD/ASSOCIATION/MLS	PHONE	EMAIL
❑ CLARE-GLADWIN	(989) 246-0714	claregladwinrealtors@gmail.com
❑ EMMET-ANTRIM-CHARLEVOIX	(231) 347-0700	info@emmetrealtors.com

Name of licensee making application: _____

NRDS#: _____ Permanent License # and type _____

Mobile Phone#: _____ Your Email: _____

For licensees associated with a Franchise, please provide the name of the Franchise Employing Brokerage that holds your license: _____

PRINT NAME

Office Name, Address, City, Zip Code and Phone Number for location from which you work;

_____

Supervising Broker/Designated REALTOR: _____

Name of Your Member Board/Association that you receive Data Share Reciprocal Access through: (Must be a board/association that is a member association of the Michigan Reciprocal Alliance Agreement)

_____

By signing below, you agree to use your access responsibly; you agree not to share your access credentials with anyone else; you agree to the policies of service of each member association; and agree to the terms of the Michigan Reciprocal Alliance (MRA) Agreement. Each member board will provide you with their Reciprocal Access policies, sanctions and fines governing your access to their data and time of application.

Licensee Signature: _____ Date: _____

Designated REALTOR/Employing Broker Signature: _____

Your requested Log In: _____Your password will be sent to you through an internally generated email directly from the database. It will be encrypted for your protection so please be sure to save it.

Staff Entry Person: _____ **Membership Verified:** _____ **DateApplicant Notified:**_____