Forgotten Coast REALTOR® Association

78 11th Street - Apalachicola, Florida 32320
Phone: (850) 653-3322
Web Site: www.fcra.realtor
Email: Gloria@fcra.realtor or Bladen@fcra.realtor

Assistants MLS Access Application*

PLEASE PRINT

Name: _____
First **Last**

Office Name: _____

Office Address: _____

Office Phone: _____ **Fax:** _____

Assistants Cell Phone: _____

E-Mail: _____

Assistant To: _____

I request the following User Name: _____

I request the following Password: _____
(Up to 8 Characters)

Assistant: _____ **Date:** _____
Signature

Agent: _____ **Date:** _____
Signature

Level of Access: ☐ **Office** ☐ **Company** ☐ **named Agent Only**

As the Designated Broker, I understand that I am directly responsible for the accuracy of all information entered into the MLS system by any assistant. I also understand that I am responsible for the quarterly unlicensed Assistants fee of $30 per quarter if the named agent fails to pay it.

Broker: _____ **Date:** _____
Signature

***Application will not be processed unless it is completed entirely and submitted along with payment.**