Forgotten Coast REALTOR® Association

78 11th Street - Apalachicola, Florida 32320
Phone: (850) 653-3322
Web Site: www.fcra.realtor
Email: Gloria@fcra.realtor
Admin@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 an assistant and accept responsibility for any MLS violation fines the assistant may incur if the named agent fails to pay them. 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: _____ **Signature** _____ **Date:** _____

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