



West Central Association of REALTORS®

400 South Cable Road
Lima, Ohio 45805-3112
(419) 227-5432
secy@wcare.net

Application for Reciprocal MLS Participation

According to the rules and regulations of the Reciprocal MLS Agreement between the West Central Association of REALTORS® and the WRIST MLS, each MLS participant must provide the “secondary” MLS with the following when making application:

1. A complete list of all offices in the company, including which office(s) elect to subscribe to the Secondary MLS
2. A complete Roster of all agents and/or licensed certified appraisers in each office, designating which individuals wish to subscribe to the “secondary” MLS.

This form requires the NRDS (National REALTORS® Database System) number for offices and agents. (Call your Primary Board for these numbers)

Instructions: Please fill out this form completely and email to secy@wcare.net. A separate Office Roster form must be included for all offices. Be sure to indicate which office(s) and which individuals (including the Broker) in each office want to subscribe to the West Central Association of REALTORS®. Please have those agents wanting Reciprocity to fill out the form.

Company Name _____.

Corporate/ Home Office Address:

Street: _____ City _____ State ____ Zip Code _____.

Phone: _____ Fax: _____ Website: _____

Broker Name : _____ Ohio License # _____ NRDS # _____.

Home Address: _____ City _____ State ____ Zip _____.

Phone: _____ E-mail: _____.

Billing Address or Email (IF different from Corporate Office)

Street: _____ City _____ State ____ Zip _____.

Phone: _____ E-mail: _____.

If the Office is not already a member of the West Central Association of REALTORS® MLS, there is a one-time New MLS Office Fee of \$200 and the quarterly MLS fee for each participant which will be discounted by \$15 for each individual subscriber. (As these fees vary each quarter you will need to call the Board Office [419-227-5432] for amount)

The undersigned Designated Broker/REALTOR® hereby agrees to abide by all of the MLS Rules and Regulations of the West Central Association of REALTORS® as well as the West Central Association of REALTORS®/WRIST MLS Reciprocal Agreement.

_____ Zillow: YES__ NO__ _____
Signature of Broker Date

Branch Office Address:

Street: _____ City: _____ State: _____ Zip: _____
Office NRDS # _____ Office Manager: _____
Email: _____ Phone # _____ Fax # _____

Office Roster - List ALL agents or Licensed/Certified Appraisers in this office

Agent Name: _____ Member of West Central Association Yes No
Agents NRDS # _____ Ohio Real Estate License # _____
Home Address: _____ City _____ State __ Zip _____
Home Phone: _____ Cell Phone: _____
Phone # you would like in InnoVia: Home Cell
E-mail: _____

Agent Name: _____ Member of West Central Association Yes No
Agents NRDS # _____ Ohio Real Estate License # _____
Home Address: _____ City _____ State __ Zip _____
Home Phone: _____ Cell Phone: _____
Phone # you would like in InnoVia: Home Cell
E-mail: _____

For Additional Branch Office, Please Copy this Page and Attach

Please have those wanting Reciprocity to fill out this form and send us a list of all agents in your office.

Agent Name: _____ West Central Association MLS Yes No
Agents NRDS # _____ Ohio Real Estate License # _____
Home Address: _____ City _____ State __ Zip _____
Home Phone: _____ Cell Phone: _____
Phone # you would like in InnoVia: Home Cell E-mail: _____

Agent Name: _____ West Central Association MLS Yes No
Agents NRDS # _____ Ohio Real Estate License # _____
Home Address: _____ City _____ State __ Zip _____
Home Phone: _____ Cell Phone: _____
Phone # you would like in InnoVia: Home Cell E-mail: _____

Agent Name: _____ West Central Association MLS Yes No
Agents NRDS # _____ Ohio Real Estate License # _____
Home Address: _____ City _____ State __ Zip _____
Home Phone: _____ Cell Phone: _____
Phone # you would like in InnoVia: Home Cell
Phone # you would like in InnoVia: Home Cell E-mail: _____

Agent Name: _____ West Central Association MLS Yes No
Agents NRDS # _____ Ohio Real Estate License # _____
Home Address: _____ City _____ State __ Zip _____
Home Phone: _____ Cell Phone: _____
Phone # you would like in InnoVia: Home Cell
Phone # you would like in InnoVia: Home Cell E-mail: _____

ACKNOWLEDGEMENT AND AGREEMENT

The undersigned _____, a sales licensee, licensed/certified appraiser, and/or trainee affiliated with _____ (Brokerage) which has made application for participation in the West Central Association of REALTORS® Multiple Listing Service, hereby agrees and acknowledges that his/her access to and use of information published by the MLS is subject to the Bylaws, Rules, Regulations, Policies and Procedures as are or may be adopted by the West Central Association of REALTORS®. The undersigned acknowledges that he/she has read and understands the MLS the Bylaws, Rules, Regulations, Policies and Procedures and agrees to abide by the said the Bylaws, Rules, Regulations, Policies and Procedures. The undersigned further acknowledges that he/she may be disciplined for any violation thereof.

Executed this _____ day of _____, 20____.

Signature of Applicant

Name of Firm

Address of Firm

Telephone