

CAPITOL REGION BOARD OF REALTORS®, INC.
5 Franklin Street, Concord, NH 03301
Telephone: (603) 225-5052
FAX: (603) 225-0135
E-mail: cbr_eo@yahoo.com

New Member Requirements

To become a member of the Capitol Region Board, you must complete the following requirements:

Submit your application with the following:

- ❖ Application fee in the amount of \$150.00
- ❖ Dues in the amount of (please call the Board Office for this figure)
- ❖ Two reference letters – one business, and one personal
- ❖ A copy of your real estate license

When the above is received, it will be submitted to the Board of Directors for their approval

- ❖ Complete the Code of Ethics class online. You will need your NRDS number (this is also your I.D. number) to do this – which will be supplied by the Board Office, once the above information has been received.
The class is available at www.realtor.org, which is the National Association of REALTORS® web site.
 - ❖ The above class will satisfy the current 4-year requirement of the National Association, so you must provide the Capitol Region Board Office with a copy of the certificate that you will print out upon completion of the Code of Ethics program.
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When all of the above has been completed, you will be welcomed as a member of the Capitol Region Board of REALTORS, Inc.

If you have any questions, please contact the Board Office at the above number.

We look forward to having you as a member of our Board!

CAPITOL REGION BOARD OF REALTORS®, INC.

MEMBERSHIP TRANSMITTAL FORM (MEMBERS)

*NRDS # BD USE ONLY	
*NAME, LAST	
*NAME, FIRST	
MIDDLE INITIAL	
NICK NAME	
GENDER (circle)	M F
MARITAL STATUS	Married Single Divorced Widowed
*HOME ADDRESS (Street, City, State, Zip)	
MAILING ADDRESS	
*E-MAIL	
HOME PHONE	
HOME FAX	
WEB PAGE	
*JOIN DATE – BD USE ONLY	
*AGENCY NAME	
*AGENCY ADDRESS (Street, City, State, Zip)	
*OFFICE PHONE	
*OFFICE FAX	
CELL PHONE #	
*RE LICENSE #	
EXPERTISE: (please circle one)	Appraisal Auction Property Mgmt Brokerage Manager Commercial Residential Sales
DESIGNATIONS (please circle one)	ALC CCIM CIPS CPM CRB CRE CRS GAA GRI LTG RAA RCE
AFFILIATIONS (please circle one)	CRE CIREI IREM RLI RMNI SIOR WCR

Return to:

CAPITOL REGION BOARD OF REALTORS® , INC.
5 Franklin Street, Concord, NH 03301



REALTOR®

CAPITOL REGION BOARD OF REALTORS® , INC
APPLICATION FOR MEMBERSHIP

(IMPORTANT: Applicants for primary, secondary, or Designated REALTOR® membership, are required to complete Section I. Applicants for REALTOR® membership who are principals, partners, corporate officers or branch office managers must also complete Section III, found at the end of this application)

SECTION I.

(Applicant's Name)

Home Address:

Home Telephone:

Business Name & Address:

Business Telephone:

I hereby apply for REALTOR® (primary, secondary, Designated) membership in the above named Board/Association, and enclose my application fee in the amount of \$150.00 (call the Board Office for prorated dues figure) which I understand will be returned to me in the event I am not accepted to membership. In the event my application is approved, I agree as a condition to membership to complete the orientation course of the above named Board/Association, if any, and otherwise on my own initiative to thoroughly familiarize myself with the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, including the duty to arbitrate contractual and specific non-contractual disputes in accordance with Article 17 of the Code of Ethics and the *Code of Ethics and arbitration Manual* of the Board, and the Constitution, Bylaws, and Rules and Regulations of the above named Board, the State Association and the National Association, and I further agree to complete satisfactorily a reasonable and nondiscriminatory written examination covering such Code, Constitutions, Bylaws, Rules and Regulations, and duty to arbitrate. I further agree that my act of paying dues shall evidence my initial and continuing commitment to abide by the aforementioned Code of Ethics, Constitution, Bylaws, Rules and Regulations, and duty to arbitrate, all as from time to time amended. Finally, I consent and authorize the Board, through its Membership Committee or otherwise, to invite and receive information and comment

about me from any Member or other person, and I agree that any information and comment furnished to the Board by any Member or other person in response to any such invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel, or defamation of character .

NOTE: Applicant acknowledges that the board/association will maintain a membership file of information which may be shared with other boards/associations where applicant subsequently seeks membership. This file shall include: previous applications for membership, all final findings of Code of Ethics violations and violations of other membership duties within the past three (3) years, pending complaints alleging violations of the Code of Ethics or alleging violations of other membership duties, incomplete or pending disciplinary measures, pending arbitration requests, and information related to unpaid arbitration awards or unpaid financial obligations to the board/association or its MLS.

NOTE: Applicant acknowledges that if accepted as a Member and he/she subsequently resigns or is expelled from membership in the Board with an ethics complaint or arbitration request pending, the Board of Directors may condition renewal of membership upon applicant's verification that he/she will submit to the pending ethics or arbitration proceeding and will abide by the decision of the hearing Panel, or if applicant resigns or is expelled from membership without having complied with an award in arbitration, the Board of Directors may condition renewal of membership upon his/her payment of the award, plus any costs that have been established previously as due and payable in relation thereto, provided that the award and such costs have not, in the interim, been otherwise satisfied.

NOTE: Dues payments to the Board/Association are not tax deductible as charitable contributions. Portions of such payments may be tax deductible as ordinary and necessary business expenses.

I hereby submit the following information for your consideration

Name as shown on license:

Name as you want it to appear on the roster:

Nickname:

License Number:

Type of license Broker Salesperson Other (specify) _____

Tax ID. Number:

SECTION 11:

Do you hold, or have you ever held, a real estate license in any other state?

Yes No

If yes, please specify:

Has your real estate license, in this or any other state, been suspended or revoked?

Yes No

If "yes" specify the place(s) and date(s) of such action, and detail the circumstances relating thereto?

Are there now any pending or unresolved complaints, or have there been within the past three (3) years, any complaints against you or the firm with which you have been associated before any state real estate regulatory agency or any other agency of government?

Yes No

If "yes", specify the substance of each complaint in each state, the agency before which complaint was made and the current status or resolution of such complaint:

Have you ever been convicted of a felony? Yes No

If so, give details including state and court of conviction:

PLEASE PROCEED TO NEXT PAGE.....

PERSONAL DATA

Place of Birth: _____
(city or country) (state) (county)

Date of Birth: month _____ day _____

First entered the real estate profession: _____, at _____

Have you been continuously engaged in real estate since that date? Yes No

If not, during what years were you in the business? _____

How many years have you been active in the real estate profession? _____

Salesperson Broker Other: _____

In what phase of real estate do you specialize? _____

In what other businesses have you been engaged? _____

_____ from ____ to ____, at _____
(city)
_____ from ____ to ____, at _____
(city)
_____ from ____ to ____, at _____
(city)

Established in present location _____

Last previous location _____

Resident here since _____

Previous residence _____
(city or county and state)

Are you a member of any other real estate board, whether or not affiliated with the NATIONAL ASSOCIATION OF REALTORS®? No Yes _____
(Name of Board)

If "yes", list each other such Board, type of membership held, and dates establishing the time period for which membership has been held:

Are you now employed or engaged in any other business or profession? Yes No

If so, position and location: _____

Are you a member of an Institute, Society or Council affiliated with the NATIONAL ASSOCIATION OF REALTORS®? Yes No

If yes, please indicate the name of the Affiliate: _____

What professional designations, if any, do you hold? _____

I agree that, if accepted for Membership in the Board, I shall pay the fees and dues as from time to time established. I further certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, may be grounds for revocation of my membership, if granted.

Signed: _____

{ Applicant name, and date signed }

SECTION III:

This section must be completed by applicants for REALTOR® Membership, whether primary or secondary or "designated", who are principals, partners, corporate officers, or individuals in positions of management, control on behalf of individuals who are not physically present and engaged in the real estate profession in connection with the firm's office located within the jurisdiction of the Board (e.g., branch office managers).

State the names and titles of all other principals, partners, or corporate officers of your firm:

(Name) (Title)

(Name) (Title)

(Name) (Title)

Is the office address, as stated in Section I, your principal place of business?

Yes No

List the names and addresses of all branch offices or other real estate firms in which you are a principal, partner, or corporate officer, within the jurisdiction of the Board:

(Name) (Address)

(Name) (Address)

Business and Credit References:

Bank:

General Account: _____
(Name of Bank) (Account)

Escrow Account: _____
(Name of Bank) (Account)

Others: _____
(Name of Bank) (Account)

Are you or is any real estate firm in which you are a sole proprietor, general partner, or corporate officer, involved in any pending bankruptcy or insolvency proceeding or have you or any real estate firm in which you are a sole proprietor, general partner or corporate officer been adjudged bankrupt in the past three (3) years?

Yes No

If yes, specify the place(s) and date(s) of such action, and detail the circumstances relating thereto:

NOTE: Applicant acknowledges that if the applicant or any real estate firm in which the applicant is a sole proprietor, general partner, or corporate officer is involved in any pending bankruptcy or insolvency proceedings or has been adjudged bankrupt in the past three (3) years, the Board may require as a condition of membership that the bankrupt applicant pay cash in advance for Board and MLS fees for up to one (1) year from the date that membership is approved, or from the date that the applicant is discharged from bankruptcy (whichever is later) or, in the event that bankruptcy proceedings are initiated subsequent to obtaining membership in the Board, that the member may be placed on a "cash basis" from the date that bankruptcy is initiated until one (1) year from the date that the member has been discharged from bankruptcy.