

# Northwest Mississippi Association of REALTORS®

2795 Hwy 51 North • P.O. Box 7 • Nesbit, MS 38651

Telephone: 662.449.3553 • Fax: 662-449-3599

Website: www.nwmar.com • E-mail: info@nwmar.com.

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*“The Voice for Real Estate in Northwest Mississippi”*

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## Forms and Requirements

### NWMAR Primary Membership:

1. Copy of Mississippi wall License or a copy of agent/broker General Information page from MREC site.
2. NWMAR Membership Transmittal form completed.
3. NWMAR Provisional Agreement form completed.
4. NWMAR Agent Add form completed & signed by Broker.
5. MLS Participation Agreement completed & signed by Broker.
6. Application for Membership completed.

### NWMAR Secondary Membership

1. Copy of Mississippi wall License or a copy of agent/broker General Information page from MREC site.
2. NWMAR Membership Transmittal form completed.
3. NWMAR Provisional Agreement Form completed.
4. NWMAR Agent Add form completed & signed by Broker.
5. MLS Participation Agreement completed & signed by Broker.
6. Letter of Good Standing from primary association.
7. National REALTORS® Database System (NRDS) number.
8. Application for Membership completed.

### MLS ONLY without NWMAR membership:

1. Copy of Mississippi Wall License or a copy of agent/broker General Information page from MREC site.
2. NWMAR Membership Transmittal form completed.
3. NWMAR Provisional Agreement Form completed.
4. NWMAR Agent Add form completed & signed by Broker.
5. MLS Participation Agreement completed & signed by Broker.
6. Letter of Good Standing from primary association.
7. National REALTORS® Database System (NRDS) number.

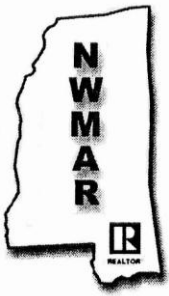
**All of the above must be completed and turned in with proper fees before activation.**

NWMAR will assess the Designated Broker REALTOR® for all active Mississippi Licensees (salespersons, brokers and appraisers) the DR holds license for.

# NORTHWEST MISSISSIPPI ASSOCIATION OF REALTORS FEES BREAKDOWN

	January	February	March	April	May	June	July	August	September	October	November	December
<b><u>Primary</u></b>												
NAR	120.00	110.00	100.00	90.00	80.00	70.00	60.00	50.00	40.00	30.00	20.00	10.00
NAR ad campaign	35.00	35.00	35.00	35.00	35.00	35.00	35.00	35.00	35.00	35.00	35.00	35.00
MAR	161.00	148.00	134.00	121.00	107.00	94.00	81.00	67.00	54.00	40.00	27.00	13.00
MAR Application Fee	25.00	25.00	25.00	25.00	25.00	25.00	25.00	25.00	25.00	25.00	25.00	25.00
MAR Issues Mobil. Fund	12.50	12.50	12.50	12.50	12.50	12.50	12.50	12.50	12.50	12.50	12.50	12.50
<i>Application Fee</i>	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00
<b><u>Member Total</u></b>	<b>553.50</b>	<b>530.50</b>	<b>506.50</b>	<b>483.50</b>	<b>459.50</b>	<b>436.50</b>	<b>413.50</b>	<b>389.50</b>	<b>366.50</b>	<b>342.50</b>	<b>319.50</b>	<b>295.50</b>
<b><u>Secondary</u></b>												
MAR	161.00	148.00	134.00	121.00	107.00	94.00	81.00	67.00	54.00	40.00	27.00	13.00
MAR Application Fee	25.00	25.00	25.00	25.00	25.00	25.00	25.00	25.00	25.00	25.00	25.00	25.00
MAR Issues Mobil. Fund	12.50	12.50	12.50	12.50	12.50	12.50	12.50	12.50	12.50	12.50	12.50	12.50
<i>Application Fee</i>	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00
<b><u>Member Total</u></b>	<b>398.50</b>	<b>385.50</b>	<b>371.50</b>	<b>358.50</b>	<b>344.50</b>	<b>331.50</b>	<b>318.50</b>	<b>304.50</b>	<b>291.50</b>	<b>277.50</b>	<b>264.50</b>	<b>250.50</b>
<b><u>REALTOR SERVICES CORPORATION - MLS FEES</u></b>												
	January	February	March	April	May	June	July	August	September	October	November	December
MLS (NWMAR Memb.)	125.00	85.00	45.00	290.00	242.00	194.00	146.00	98.00	50.00	290.00	242.00	194.00
<i>Application Fee</i>	250.00	250.00	250.00	250.00	250.00	250.00	250.00	250.00	250.00	250.00	250.00	250.00
<b><u>MLS Total</u></b>	<b>375.00</b>	<b>335.00</b>	<b>295.00</b>	<b>540.00</b>	<b>492.00</b>	<b>444.00</b>	<b>396.00</b>	<b>348.00</b>	<b>300.00</b>	<b>540.00</b>	<b>492.00</b>	<b>444.00</b>
MLS ONLY	175.00	115.00	60.00	390.00	325.00	260.00	195.00	130.00	65.00	390.00	325.00	260.00
<i>Application Fee</i>	350.00	350.00	350.00	350.00	350.00	350.00	350.00	350.00	350.00	350.00	350.00	350.00
<b><u>MLS ONLY Total</u></b>	<b>525.00</b>	<b>465.00</b>	<b>410.00</b>	<b>740.00</b>	<b>675.00</b>	<b>610.00</b>	<b>545.00</b>	<b>480.00</b>	<b>415.00</b>	<b>740.00</b>	<b>675.00</b>	<b>610.00</b>

MLS BI-ANNUAL FEES ARE \$290.00 (\$390.00 FOR MLS ONLY) DUE APRIL 1 AND OCTOBER 1. THE APPLICATION FEES ARE ASSESSED ONE TIME ONLY.



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## NORTHWEST MISSISSIPPI MEMBERSHIP® TRANSMITTAL FORM For Adding New Members and Reporting Changes (*items in italics are required data*)

### MEMBER DATA

NRDS ID# \_\_\_\_\_ SS#: \_\_\_\_\_  
Title: Mr. Mrs. Ms. MREC License Number: \_\_\_\_\_  
Name: First \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_  
Gender: (circle one) Male Female Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
Member Type: \_\_\_ REALTOR® \_\_\_ Designated REALTOR® \_\_\_  
° DR \_\_\_\_\_

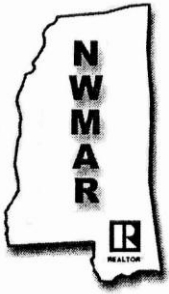
Office Name: \_\_\_\_\_  
Office Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Office Telephone #: \_\_\_\_\_ Office FAX #: \_\_\_\_\_  
Cellular Telephone # \_\_\_\_\_ Toll-Free #: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_ Website: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Preferred Mail to: \_\_\_Office \_\_\_Home  
Preferred Phone: \_\_\_Office \_\_\_Home  
Primary Local Board/Assn.: \_\_\_\_\_  
Secondary Local Board/Assn.: \_\_\_\_\_  
Primary State Assn.: \_\_\_\_\_ Secondary State Assn.: \_\_\_\_\_

### DEMOGRAPHIC INFORMATION (*Required for new members*)

Year licensed as salesperson: \_\_\_\_\_ Year licensed as broker: \_\_\_\_\_  
What is the highest level of school completed? (circle one) Some high school High School  
Some College Bachelor's Degree Master's Degree Doctorate

REALTOR® Educational Designations held (circle all that apply):

ABR GRI CCIM CPM CRB CRS LTG CRE ALC  
CIPS GAA RAA SIOR RCE Other:



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## NWMAR AGENT ADD FORM

For Transfer of Company you MUST include Active/Pending listings to be transferred before reactivation.

Licensee’s Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

Date License Issued \_\_\_\_\_ License Number \_\_\_\_\_

Company Name \_\_\_\_\_

Office Phone (\_\_\_\_\_) \_\_\_\_\_ Office Fax (\_\_\_\_\_) \_\_\_\_\_

**“I, the undersigned broker have verified through Mississippi Real Estate Commission that the above named agent has an active license and is in good standing with**

\_\_\_\_\_.” Signed,  
Company name

\_\_\_\_\_  
Designated REALTOR® (Broker) Signature

\_\_\_\_\_  
Date

**Board staff will consider this authorization to complete the agent.**

*NWMAR & RSC Bylaws require any licensee changes be submitted immediately by the Designated REALTOR®. Licensee changes not submitted within 30 days are subject to a fine being sent to the Designated REALTOR®.*

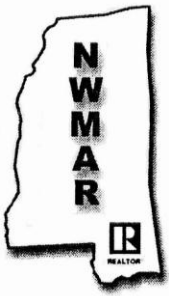
*Please send this notification immediately when you receive a new licensee, when a licensee requests a transfer to another firm, or when a licensee retires or puts their license on inactive status. When you are aware that one of your licensees is temporarily on inactive status due to lack of continuing education, insurance, or license fees, please notify us immediately.*

\_\_\_\_\_  
Agent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Designated REALTOR® (Broker) Signature

\_\_\_\_\_  
Date



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Title: Mr. Mrs. Ms. MREC License Number: \_\_\_\_\_  
Name: First \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_  
Gender: (circle one) Male Female Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_  
Member Type: \_\_\_ REALTOR® \_\_\_ Designated REALTOR® \_\_\_  
° DR \_\_\_\_\_

Office Name: \_\_\_\_\_  
Office Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Office Telephone #: \_\_\_\_\_ Office FAX #: \_\_\_\_\_  
Cellular Telephone # \_\_\_\_\_ Toll-Free #: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_ Website: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Preferred Mail to: \_\_\_Office \_\_\_Home  
Preferred Phone: \_\_\_Office \_\_\_Home  
Primary Local Board/Assn.: \_\_\_\_\_  
Secondary Local Board/Assn.: \_\_\_\_\_  
Primary State Assn.: \_\_\_\_\_ Secondary State Assn.: \_\_\_\_\_

### DEMOGRAPHIC INFORMATION (*Required for new members*)

Year licensed as salesperson: \_\_\_\_\_ Year licensed as broker: \_\_\_\_\_  
What is the highest level of school completed? (circle one) Some high school High School  
Some College Bachelor's Degree Master's Degree Doctorate

REALTOR® Educational Designations held (circle all that apply):

ABR GRI CCIM CPM CRB CRS LTG CRE ALC  
CIPS GAA RAA SIOR RCE Other:

## MLS Participation/Subscriber Agreement

Northwest Mississippi Association of REALTORS® – REALTOR Services Corporation®

Licensee Name: \_\_\_\_\_

Office Name: \_\_\_\_\_

Office Address: \_\_\_\_\_

Primary Board or Association: \_\_\_\_\_

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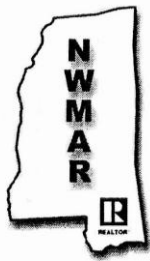
I agree as a condition of participation in the MLS to abide by all relevant Bylaws, Rules and other obligations of participation including payment of fees. I further agree to be bound by the Code of Ethics on the same terms and conditions as board/association members including the obligation to submit to ethics hearings and the duty to arbitrate contractual disputes with other REALTORS® in accordance with the established procedures of the board/association. I understand that a violation of the Code of Ethics may result in termination of my MLS privileges and that I may be assessed an administrative processing fee which may be in addition to any discipline, including fines, that may be imposed.

\_\_\_\_\_  
Signature of Designated REALTOR® (Broker)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Subscriber

\_\_\_\_\_  
Date



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## NWMAR Provisional Agreement Form

DESIGNATED REALTOR®       REALTOR®  
(Broker/Owner)                      (Non-Principal Broker)

I, \_\_\_\_\_ hereby apply for Realtor Membership in the above Association/MLS. I agree to abide by the Code of Ethics of the National Association Of Realtors® and the Constitution, Bylaws and Rules and Regulations of the above named Association, the State Association and the National Association. I consent that the Association through it's membership committee or otherwise, may invite and receive information and comment about me from any member or other person and I further agree that any information and comment furnished to the Association by any person in response to the 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.

I acknowledge that my membership becomes effective upon completion of any required Orientation Course.

Scheduled date: \_\_\_\_\_

Are you currently or have you ever been a REALTOR® member of another board?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

If Yes, we must have documentation from that board which proves the following:

1. Board name, address, phone number and NRDS#
2. Your member NRDS# \*
3. Your office NRDS# \*
4. Your board join date
5. Your orientation date

\*NRDS# is not required if you were not an active member after June 1998  
NRDS = National Realtor Database System

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Please Contact Northwest Mississippi Association of REALTORS® for Fee Information.

662-449-3553

Thank you.



APPLICATION FOR REALTOR® MEMBERSHIP

To the Northwest Mississippi Association of REALTORS®, I hereby apply for REALTOR® Membership in the above named Board. I agree to abide by the Code of Ethics of the National Association of REALTORS®, which includes the duty to arbitrate, and the Constitution, Bylaws and Rules and Regulations of the above named Board, the State Association and the National Association, and if required, I further agree to satisfactorily complete any written examination on such Code, Constitutions, Bylaws and Rules and Regulations required by the association. I understand membership brings certain privileges and obligations that require compliance. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements, such as orientation, not be completed within timeframe established in the association's bylaws. I understand that I will be required to complete periodic Code of Ethics training as specified in the association's bylaws as a continued condition of membership.

NOTE: Applicant acknowledges that if accepted as a member and he/she subsequently resigns from the Board or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon applicant's certification that he/she will submit to the pending ethics proceeding and will abide by the decision of the hearing panel. If applicant resigns or otherwise causes membership to terminate, the duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose while applicant was a REALTOR®.

I hereby submit the following information for your consideration:

Name: \_\_\_\_\_
Real Estate License #: \_\_\_\_\_ SS Number: \_\_\_\_\_
Licensed/certified appraiser: [ ] Yes [ ] No Appraisal License #: \_\_\_\_\_
Office Name: \_\_\_\_\_
Office Address: \_\_\_\_\_
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_
Residence Address: \_\_\_\_\_
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_
Cell Phone: \_\_\_\_\_ Preferred Mailing: [ ] Home [ ] Office Preferred Phone: [ ] Home [ ] Office

Are you presently a member of any other Association of REALTORS®? [ ] Yes [ ] No
If yes, name of Association and type of membership held: \_\_\_\_\_
Have you previously held membership in any other Association of REALTORS®? [ ] Yes [ ] No
If yes, name of Association and type of membership held: \_\_\_\_\_
Have you been found in violation of the Code of Ethics or other membership duties in any Association of REALTORS® in the past three (3) years or are there any such complaints pending? [ ] Yes [ ] No (If yes, provide details as an attachment.)
If you are now or have ever been a REALTOR®, indicate your NAR membership (NRDS) #: \_\_\_\_\_
and last date (year) of completion of NAR's Code of Ethics training requirement: \_\_\_\_\_
Are you a principal, partner, corporate officer or branch office manager? [ ] Yes [ ] No If yes, you must also complete 2nd page of this application.

I hereby 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, shall be grounds for revocation of my membership if granted. I further agree that, if accepted for membership in the Board, I shall pay the fees and dues as from time to time established. NOTE: Payments to the Northwest Mississippi Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. I understand there will be no refunds after membership approval.

By signing below I consent that the REALTOR® Associations (local, state, national) and their subsidiaries, if any (e.g., MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address or other means of communication available. This consent applies to changes in contact information that may be provided by me to the Association(s) in the future. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my membership.

Dated: \_\_\_\_\_ Signature: \_\_\_\_\_

(Optional Information): Date of Birth: \_\_\_\_\_
Specialty: [ ] Residential [ ] Commercial [ ] Resort [ ] International [ ] Other: \_\_\_\_\_
How long with current real estate firm? \_\_\_\_\_ Previous real estate firm (if applicable): \_\_\_\_\_
Number of years engaged in the real estate business: \_\_\_\_\_



APPLICATION FOR REALTOR® MEMBERSHIP: PAGE 2 FOR DESIGNATED BROKERS/BRANCH MANAGERS

Company information:     Sole Proprietor    Partnership    Corporation    LLC(Limited Liability Company)

Your position:     Principal     Partner     Corporate Officer     Branch Office Manager

Names of other Partners/Officers/ of your firm:

\_\_\_\_\_

Have you ever been refused membership in any other Association of REALTORS®? [  ] Yes [  ] No

If yes, state the basis for each such refusal and detail the circumstances related thereto:

\_\_\_\_\_

Is the Office Address, as stated, your principal place of business? [  ] Yes [  ] No

If not, or if you have any branch offices, please indicate and give address:

\_\_\_\_\_

Do you hold, or have you ever held, a real estate license in any other state? [  ] Yes [  ] No

If so, where:

\_\_\_\_\_

Have you or your firm been found in violation of state real estate licensing regulations within the last three years? If yes, provide details:

\_\_\_\_\_

Have you or you firm been convicted, adjudged, or otherwise recorded as guilty by a final judgment of any court of competent jurisdiction of a felony or other crime. If yes, provide details:

\_\_\_\_\_

I hereby 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, shall be grounds for revocation of my membership if granted. I further agree that, if accepted for membership in the Board, I shall pay the fees and dues as from time to time established. **NOTE:** Payments to the Northwest Mississippi Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. I understand there will be no refunds after membership approval.

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Dated: \_\_\_\_\_

Signature: \_\_\_\_\_