



Web: [www.rirealtors.org](http://www.rirealtors.org)  
[www.riliving.com](http://www.riliving.com)

The REALTOR® Building  
100 Bignall Street  
Warwick, Rhode Island 02888  
Phone: (401) 785-3650  
Fax: (401) 941-5360

**APPLICATION FOR SECONDARY MEMBERSHIP – page 1 of 2**

I hereby apply for ACTIVE REALTOR® (secondary) membership in the above named Association, enclosing my check in the amount of \$ \_\_\_\_\_. (Annual dues are \$148.50 prorated monthly on a calendar year). I am currently an ACTIVE REALTOR® in my primary Board/Association-listed below.) In the event of my election, I agree to abide by the Code of Ethics of the NATIONAL ASSOCIATION OF REALTORS®, including the duty to arbitrate any future disputes with another Member in accordance with the Associations' arbitration procedures. I also agree to abide by the Constitution & Bylaws, and Rules and Regulations of the above named State Association and the National Association, and if required, I further agree to satisfactorily complete a reasonable and non-discriminatory written examination on such Constitutions, Bylaws, and Rules and Regulations. I consent that and authorize the Association, through its membership Committee or otherwise to invite and receive information and comment about me from any Member or other such person, and I agree that any information and comment furnished to the Board by any member of other person in response to any such invitation shall be conclusively deemed to be privileged and not form that basis of any action by me for slander, libel, or defamation of character.

**Note:** Dues payments to the Rhode Island Association of REALTORS® are not tax deductible as charitable contributions. Portions of such payments may be deductible as ordinary and necessary business expenses. Applicant acknowledges that if accepted as a Member and he/she subsequently resign from membership in the Association with an ethics complaint or arbitration request pending, the Board of Directors may condition the right of the resigning Member to reapply for Membership upon the applicants 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 a Member resigns without having complied with an award in arbitration, the Board of Directors may condition any reapplication of the former Member upon his/her promise to pay the award, plus any costs that have previously been established as due and payable by the former Member, provided that the award has not, in the meanwhile been otherwise satisfied.

I hereby submit the following information for your consideration. **(Please Print)**

**Name and Address of Primary Association**

Association Name \_\_\_\_\_ Association Phone \_\_\_\_\_

Association Address \_\_\_\_\_

Name as shown on Real Estate License/Appraiser Certified \_\_\_\_\_ Ms. \_\_\_\_\_ Mrs. \_\_\_\_\_ Mr. \_\_\_\_\_

Real Estate License No. \_\_\_\_\_ Year First Licensed \_\_\_\_\_

Name of Firm \_\_\_\_\_

Office Address \_\_\_\_\_ (Street) \_\_\_\_\_ (Suite) \_\_\_\_\_ If new firm TAX ID # \_\_\_\_\_

Office Mailing Address \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_ (Phone) \_\_\_\_\_ (Fax)

State position with firm (check all that apply):  
 Independent Contractor  Office Manager  Partner  Corporate officer  Trustee  Employee  Other

If other, explain \_\_\_\_\_

Are you now employed in any business or profession other than real estate? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes \_\_\_\_\_ (Position and location)

I agree that if accepted for Membership in the Association I shall pay the fees and dues as from time to time established. 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.

Dated: \_\_\_\_\_ 20\_\_\_\_ Signed: \_\_\_\_\_ (Applicant)



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**PERSONAL DATA** – page 2 of 2

Residence Address:

\_\_\_\_\_  
(Street) (Apt. #) (City) (State) (Phone)

Name as you want it to appear in Roster:

\_\_\_\_\_  
(Last Name) (First Name) (Initial) (Social Security Number)

First licensed/certified in this State \_\_\_\_\_ Year \_\_\_\_\_

Have you been engaged continuously in the business since then? \_\_\_\_ Yes \_\_\_\_ No

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

How many years have you been active as a Salesperson? \_\_\_\_ Appraiser? \_\_\_\_  
Broker? \_\_\_\_ Other? \_\_\_\_

Established at present firm \_\_\_\_\_ Year \_\_\_\_\_

Last previous firm \_\_\_\_\_

Have you previously held membership in any other real estate board? \_\_\_\_ Yes \_\_\_\_ No

If "Yes" name each such Board, type of membership held, and dates establishing the time period for which membership was held.

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been refused membership in any other real estate board? \_\_\_\_ Yes \_\_\_\_ No

If "Yes" state basis for each such refusal and detail the circumstances related thereto.

\_\_\_\_\_

Do you hold, or have you ever held, a real estate license or appraisal license/certificate in any other state?  
\_\_\_\_ Yes \_\_\_\_ No If "Yes", specify \_\_\_\_\_

Has your real estate license or real estate appraisal license/certificate been suspended or revoked?  
\_\_\_\_ Yes \_\_\_\_ No If "Yes", specify the place(s) of such action, and detail the relating thereto.

\_\_\_\_\_

Are there now, or have there been within the past three years, any complaints against you 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 "Yes", give details \_\_\_\_\_

As to the best of my knowledge the above information is accurate. Signature \_\_\_\_\_



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