



State-Wide Multiple Listing Service, Inc. ADMINISTRATOR AFFIDAVIT

This Administrator Affidavit Form can be faxed to MLS at 401-941-5320 or e-mailed to Jean Croteau, MLS Member Services Administrator at membership@rirealtors.org. If login credentials are not received within 2 business days, please contact Jean at 401-432-6935. Please Note: Administrators are billed \$15.00 per month to the office account. A one-time activation fee of \$100.00 will also be assessed if the Administrator has not previously been a member of State-Wide MLS.

Administrator Type: (Please select one)

- Office Administrator** *(Will have full access to office inventory)*
- Team Assistant** *(Will have limited access to the team inventory)*

Team Name: _____

- Agent Assistant** *(Will have limited access to an individual agent(s) inventory)*

Agent Name: _____

Administrator's Information:

Name: _____ **Phone:** _____

E-Mail _____

Office Name: _____ **Office Code:** _____

Office Address: _____

I acknowledge that it is my obligation to notify MLS immediately when the person to whom the access code is assigned is no longer employed by or affiliated with the office for which I am the Participant. I further acknowledge that the penalty for unauthorized access by a non-member is \$1,000 per violation.

I understand and agree that use of information developed by or published by State-Wide MLS is strictly limited to the activities authorized under Participant's license(s) and unauthorized uses are prohibited.

MLS Rules and Regulations describe the Users as follows:

"User" shall mean an employee of a Participant who is not licensed as a real estate broker, salesperson, or appraiser but has access to the data, including, but not limited to a secretary, office manager, or unlicensed personal assistant."

I acknowledge that it is my obligation to notify MLS immediately if person to whom the access code is assigned to receives a Real Estate license.

I hereby certify that the individual listed above is an unlicensed office administrator/assistant employed in my office and requires MLS access for the sole purpose of assisting with real estate or appraisal functions within this office and is authorized to view/attend training on the MLS system and MLS Policies and obtain an individual access code to MLS access in the capacity indicated on this form.

PRINT NAME OF PRINCIPAL BROKER/MANAGER

SIGNATURE

SIGNATURE OF ADMINISTRATOR/ASSISTANT

DATE