

Administrative Data Worksheet

Note: This form is to be completed by Office Staff requesting access to the MLS system Database.

Date:	_		
Name:(Last Name)	(First Name)	(Middle Initial)	
(Last Name) Office Name:		3000	
Office Address:			
City:	_ State: Zip:		
Office Phone:	_ Office Fax:		
Position:			
E-mail Address:			
DO YOU HOLD A REAL ESTATE LICENSE?			
IF SO, INDICATE LICENSE NUMBER:			
IF SO, ARE YOU CURRENTLY SELLING OR LISTING PROPERTY?			
13. BROKER'S SIGNATURE:			
(RASM OFFICE ONLY)			
Password Security Le	evel Date Assigned_		
Type	Status		



MLS SECURITY AGREEMENT

OFFICE STAFF

MLS computer passwords are distributed exclusively to those brokers, their agents and office staff who are members of the Southern MN MLS and the REALTOR® Association of Southern Minnesota. These passwords are **not** to be distributed, loaned or given to any other individual. Access is only for purposes directed by the Broker for Real Estate business. Access is **not** allowed for personal use or for personal information. Violations of this policy are to be promptly reported to the MLS Committee in writing. Fines for giving out code words to **anyone** are:

1st Offense: \$1,000.00 Subsequent Offenses: Additional fine and subject to suspension or termination by the Board of Directors of the REALTOR® Association of Southern Minnesota.

Failure to report within 1 business day admin staff leaving a brokerage employment will result in a \$1,000.00 fine to the broker per violation.

I agree to abide by the rules and regulations concerning MLS Computer Passwords. I understand that if I violate this policy, I will be subject to the above listed fines.

*As the broker I acknowledge if any admin staff violate rules the fine will be charged to me.

Date:	
Signature:	
Company:	
Broker Signature:	

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