



# APPLICATION



## REALTOR® MEMBERSHIP

GREATER HARTFORD ASSOCIATION OF REALTORS®, INC.

433 South Main Street, West Hartford, CT 06110

telephone: (860)561-1800 fax: (860) 561-3573

www.GHARonline.com

I hereby apply for Membership in the above-named Association of REALTORS® (hereinafter referred to as the Association), the Connecticut Association of REALTORS® and the NATIONAL ASSOCIATION OF REALTORS®.

1. Name: Mr./Mrs./Ms. \_\_\_\_\_  
(as shown on license)

2. Real Estate license #: \_\_\_\_\_ Appraisers license #: \_\_\_\_\_  
☐ Broker exp. date: \_\_\_\_\_ exp. date: \_\_\_\_\_  
☐ Salesperson

\*\*\*A copy of your real estate license must accompany this application.\*\*\*

3. Firm Name: \_\_\_\_\_

4. Firm Address: \_\_\_\_\_  
(P.O. Box) (street) (city) (state) (zip)

a. Is this your principal place of business? ☐ Yes ☐ No

b. **DESIGNATED REALTORS® ONLY:** Please list any branch offices that will have access to MLS:

\_\_\_\_\_  
(street) (city) (state) (zip)

5. Firm Phone: ( ) \_\_\_\_\_ Ext: \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

6. Other Business Phone: ( ) \_\_\_\_\_

7. Home Address: \_\_\_\_\_  
(street) (city) (state) (zip)

8. Home Phone: ( ) \_\_\_\_\_ Home Fax: ( ) \_\_\_\_\_

E-mail address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

9. Which do you prefer as a mailing address? ☐ Firm ☐ Home

10. I hereby apply as a (check all applicable boxes):

(a) ☐ Primary Membership  
☐ Secondary Membership

(b) ☐ Designated REALTOR®  
☐ REALTOR®

11. Persons other than principals, partners or corporate officers of real estate or appraisal firms must remain employed by or affiliated with a Designated REALTOR® to be eligible for Membership.

Name of Designated REALTOR®: (Print Name) \_\_\_\_\_

a. Please indicate the primary nature of your real estate business:

☐ Commercial ☐ Residential ☐ Commercial/Residential ☐ Appraisal

12. List below any professional designations you hold:

13. What Boards/Associations of REALTORS® do you NOW belong to as a Member? \_\_\_\_\_

14. What Boards/Associations of REALTORS® have you PREVIOUSLY belonged to as a Member? \_\_\_\_\_

15. Have you been disciplined by any of the above Boards/Associations within the past three years?

☐ Yes ☐ No

a. Do you have any pending Ethics complaints or Arbitration requests with any of the above Boards/Associations? ☐ Yes ☐ No (If yes, attach copies)

b. Do you have any unsatisfied discipline pending from any of the above Boards/Associations?

☐ Yes ☐ No

c. Do you have any unpaid arbitration awards or unpaid financial obligations with any of the above Boards/Associations? ☐ Yes ☐ No

16. Have you ever been disciplined by the Real Estate Commission?

☐ Yes ☐ No

(If yes, attach copies of discipline.)

**DESIGNATED REALTOR® APPLICANTS ONLY (#'s 19-21):**

17. Check the applicable boxes: I am a . . . ☐ sole proprietor ☐ corporate officer  
☐ general partner ☐ branch office manager ☐ LLC

18. Sole proprietors, general partners or corporate officers must answer these questions:

a. Are you subject to any pending bankruptcy proceedings? ☐ Yes ☐ No

b. Have you been adjudged bankrupt within the last three(3) years? ☐ Yes ☐ No

c. Do you have any record of official sanctions by a court or other lawful authority within the past three (3) years for . . .

civil rights laws ☐ Yes ☐ No

real estate licensing laws ☐ Yes ☐ No

other laws prohibiting unprofessional conduct ☐ Yes ☐ No

19. Please list ALL licensees affiliated with your office (type of license and license numbers under your license). Attach sheet if necessary.

Name	Broker, Sales or Appraiser	Real Estate License # or Appraiser #
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20. **ARBITRATION AGREEMENT:** (a) I hereby agree for myself and the firm for which I act to binding arbitration of disputes with any member of this Association, with any member of the C.A.R. in accordance with its rules and regulations or any client covered by the Association rules.

21. **NO REFUND:** I understand that my Membership dues and Lockbox system fees are non-refundable. In the event I fail to maintain eligibility for Membership for any reason under the bylaws, including but not limited to discipline by the Association, I understand I will not be entitled to a refund of my dues or fees.

22. **AUTHORIZATION TO RELEASE AND USE INFORMATION AND WAIVER:** I authorize the Association or its representatives to verify any information in this application including contacting any Board/Association, the Real Estate Commission, current or past broker or business associates. I further authorize any Board/Association in which I have been a member to release all membership and disciplinary records to the Association to which I am applying. I further authorize this Association to use this information in determining future disciplinary sanctions. I waive any cause of action including, but not limited to, slander, libel or defamation of character resulting from such verification, evaluation or other processing of this application or use of the information gathered by the Association, C.A.R., N.A.R., their agents, employees, committees or members.

23. I agree that should I cease to be a REALTOR®, I will discontinue use of the term REALTOR® or REALTORS® in all certificates, signs, seals or any other medium.

24. I understand that if the Association requires orientation, I must attend such orientation prior to becoming a

Member.

25. By becoming and remaining a Member, I agree to abide by the Constitution, Bylaws, Code of Ethics and any other rules, as from time to time amended, of the NATIONAL ASSOCIATION OF REALTORS®, Connecticut Association of REALTORS®, and the Association.
26. I understand and agree that by becoming and remaining a Participant or User of the MLS, I agree to abide by the MLS rules, as from time to time amended, including but not limited to the following:
27. The security of many homeowners in the area depends on the security of the Lockbox system. I will not lend or make available my Lockbox key to any person, even if an authorized member. I further understand that the Association can incur costs in securing the system if I fail to take adequate measures to protect my key and Lockbox and that I agree to be responsible for these costs.

**I certify that the information given in this application is true and correct.**

Signature (Applicant) \_\_\_\_\_ Date \_\_\_\_\_

Signature of Designated REALTOR® \_\_\_\_\_ Date \_\_\_\_\_  
(Broker's Name)

**Contributions or gifts to the Association, the Connecticut Association of REALTORS®, and the NATIONAL ASSOCIATION OF REALTORS®, are not deductible as charitable contributions for federal income tax purposes. However, dues may be tax deductible as ordinary and necessary business expenses.**

## **PROFESSIONAL BACKGROUND & EXPERIENCE**

The Association occasionally seeks member volunteers with applicable qualifications to serve on short-term project teams or advisory groups. Below, please check all that apply pertaining to your qualifications/interests/experience that you have had which you feel would help you in serving in a voluntary capacity with the Association.

- |   |                                      |   |
|---|--------------------------------------|---|
| <input type="checkbox"/> Advertising        | <input type="checkbox"/> Information | <input type="checkbox"/> Marketing        |
| <input type="checkbox"/> Business Planning  | <input type="checkbox"/> Technology  | <input type="checkbox"/> Mediation        |
| <input type="checkbox"/> Communications     | <input type="checkbox"/> Leadership  | <input type="checkbox"/> Meeting Planning |
| <input type="checkbox"/> Education          | <input type="checkbox"/> Leadership  | <input type="checkbox"/> Political        |
| <input type="checkbox"/> Event Planning     | <input type="checkbox"/> Development | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Finance/Accounting | <input type="checkbox"/> Legal       | <input type="checkbox"/> Publishing       |
| <input type="checkbox"/> Fundraising        | <input type="checkbox"/> Legislation |   |

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(Print Name)

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(Company)