



Office/Roster Addendum for Secondary MLS Participation in the Dayton MLS

According to the Rules and Regulations of the Reciprocal MLS Agreement between the Dayton Area Board of REALTORS® and the Cincinnati Area Board of REALTORS®, each MLS Participant making application to join one of the two MLS systems as a Secondary MLS Participant must provide the Secondary MLS the following:

- 1) A complete list of all offices in the company, including which office(s) elects to subscribe to the Secondary MLS; and 2) A complete roster of all agents and/or licensed, certified appraisers in each office, including which individuals elect to subscribe to the Secondary MLS.

This form requires the NRDS (National REALTORS® Database System) Number for Offices and Agents. Call your Primary MLS for these numbers.

Instructions: Please fill out this form completely and **FAX to 937.223.1084**. A separate Office Roster form must be included for ALL offices. Be sure to indicate which office(s) and which individuals in each office want to subscribe to the Dayton MLS.

Company Name: _____

Corporate/Home Office Address:

Street: _____ City: _____

State: _____ Zip: _____ Office NRDS #: _____

Phone: (____) _____ Fax: (____) _____

Website: _____

Designated REALTOR® Name: _____

Ohio License #: _____ NRDS #: _____

Home Address: Street: _____ City: _____

State: _____ Zip: _____ Phone: (____) _____

E-mail: _____

The Designated REALTOR® will be billed the Dayton MLS Office Dues of \$20 per month for each subscribing office and the **discounted** Dayton MLS Access Fee of \$19 per month for each individual subscriber.

The undersigned Designated REALTOR® (MLS Participant) hereby agrees to abide by all the Rules and Regulations of the Dayton Area Board of REALTORS® Multiple Listing Service, and the Rules and Regulations of the Dayton/Cincinnati MLS Reciprocal Agreement.

Designated REALTOR® Signature

Date

() **Branch Office Address:** **Dayton MLS** **Yes** **No**

Street: _____ City: _____ State: _____

Zip: _____ Phone: (____) _____ Fax: (____) _____

Office NRDS #: _____ Office Manager: _____

Office Roster

List ALL real estate licensees or licensed/certified appraisers in this office.

Agent Name: _____ **Dayton MLS** **Yes** **No**

Agent NRDS #: _____ Ohio License #: _____

Home Address: Street: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ E-mail: _____

Agent Name: _____ **Dayton MLS** **Yes** **No**

Agent NRDS #: _____ Ohio License #: _____

Home Address: Street: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ E-mail: _____

Agent Name: _____ **Dayton MLS** **Yes** **No**

Agent NRDS #: _____ Ohio License #: _____

Home Address: Street: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ E-mail: _____

Agent Name: _____ **Dayton MLS** **Yes** **No**

Agent NRDS #: _____ Ohio License #: _____

Home Address: Street: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ E-mail: _____

Agent Name: _____ **Dayton MLS** **Yes** **No**

Agent NRDS #: _____ Ohio License #: _____

Home Address: Street: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ E-mail: _____

(For additional branch offices, please copy this page and attach)

Agent Name: _____ **Dayton MLS** **Yes** **No**
Agent NRDS #: _____ Ohio License #: _____
Home Address: Street: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ E-mail: _____

Agent Name: _____ **Dayton MLS** **Yes** **No**
Agent NRDS #: _____ Ohio License #: _____
Home Address: Street: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ E-mail: _____

Agent Name: _____ **Dayton MLS** **Yes** **No**
Agent NRDS #: _____ Ohio License #: _____
Home Address: Street: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ E-mail: _____

Agent Name: _____ **Dayton MLS** **Yes** **No**
Agent NRDS #: _____ Ohio License #: _____
Home Address: Street: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ E-mail: _____

Agent Name: _____ **Dayton MLS** **Yes** **No**
Agent NRDS #: _____ Ohio License #: _____
Home Address: Street: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ E-mail: _____

Agent Name: _____ **Dayton MLS** **Yes** **No**
Agent NRDS #: _____ Ohio License #: _____
Home Address: Street: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ E-mail: _____

Agent Name: _____ **Dayton MLS** **Yes** **No**
Agent NRDS #: _____ Ohio License #: _____
Home Address: Street: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ E-mail: _____

(For additional names, please copy this page and attach)