



21 N. Sandusky St. | Delaware, Ohio 43015 | (740) 363-3227 | FAX: (740) 363-3227

## DELAWARE COUNTY BOARD OF REALTORS® APPLICATION FOR REALTOR MEMBERSHIP

I, hereby, apply for **Primary** \_\_\_\_ or **Secondary** \_\_\_\_ Realtor membership to the Delaware County Board of Realtors. I agree that, if my membership is approved, I will abide by the Constitution, Bylaws, Rules & Regulations and all other resolutions adopted by the Board. I, also, agree to adhere to the Realtors Code of Ethics and further agree to arbitrate all disputes arising out of my relationship with other Realtors and the public in accordance with the Bylaws and the National Association of Realtors® as specified in Article XVII of the Code of Ethics.

I consent that the Board’s Executive Officer may invite and receive information and comment about me from any member or other persons, and I agree that any information and comments furnished to the Board by any person in response to the invitation shall be conclusively deemed to be privileged and not form the basis for any action for slander, libel or defamation of character.

**Newly licensed real estate agents:** Are required to pay an **Application fee of \$150.00 (Primary & Secondary membership)**, **Local dues** \_\_\_\_\_ (**Primary & Secondary membership**), **State dues** \_\_\_\_\_ (**Primary membership only**), **National dues** \_\_\_\_\_ (**Primary membership only**), plus a **\$25.00 OAR New Member fee** (for all **newly** licensed agents and Realtors who have **not** been a member of the Ohio Association of Realtors® for six months or more), for a total of \_\_\_\_\_ dues and fees.

**Licensed Realtors who are currently members of another Board or Association of Realtors in Ohio are not required to pay an application fee, nor required to attend orientation class:** **Local dues** \_\_\_\_\_ (**Primary and Secondary membership**), **State dues** \_\_\_\_\_ (**Primary membership only**), **National dues** \_\_\_\_\_ (**Primary membership only**), for a total of \_\_\_\_\_ dues and fees.

(Yearly dues for Local (\$175.00), State (\$110.00) and National (\$115.00) Boards are pro-rated (Call the Board office at 740-363-3227, if you are in question of the amounts owed.) Make your checks payable to: **Delaware County Board of Realtors** and mail to: **21 N. Sandusky Street, Delaware, OH 43015**. I understand that my check will be returned to me in the event that I am **not** accepted for membership to the Board. (**All dues, fees and copy of your license must accompany this application for processing.**)

I agree, that false representation of any material fact herein shall be grounds for immediate revocation of membership! I, also, acknowledge access to a copy of the Bylaws, Constitution, Rules & Regulations and the Code of Ethics: Yes \_\_\_\_ No \_\_\_\_

If applying for **Secondary Membership**, what Board is your **Primary** Board? \_\_\_\_\_  
Do you hold **Secondary Membership** in any other Board(s)! Yes \_\_\_\_ No \_\_\_\_ If yes, what Board(s) and the dates of membership:

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

**Name on license:** \_\_\_\_\_ **Date issued:** \_\_\_\_\_  
(Copy of your license must be attached!)

**License No.:** \_\_\_\_\_ **Soc. Sec. No.:** \_\_\_\_\_ **Home phone:** \_\_\_\_\_

**Cell or Mobile No.:** \_\_\_\_\_ **E-Mail Address:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

**Name of Firm:** \_\_\_\_\_



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**Business Address:** \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

**Business Phone:** \_\_\_\_\_ **FAX No.** \_\_\_\_\_  
(Area Code) (Area Code)

**Position with Firm:** **Broker** \_\_\_\_ **Manager** \_\_\_\_ **Independent Contractor** \_\_\_\_ **Appraiser** \_\_\_\_  
**Other** \_\_\_\_ **If other, explain:** \_\_\_\_\_

Are you newly licensed? Yes \_\_\_\_ No \_\_\_\_ When were you initially licensed? \_\_\_\_\_

Are you currently a member of another Board or Association of Realtors? Yes \_\_\_\_ No \_\_\_\_ If yes, what Board or Association? \_\_\_\_\_

If yes, how long? \_\_\_\_\_ Did you attend an Orientation Class? Yes \_\_\_\_ No \_\_\_\_

If yes, when and where? \_\_\_\_\_ Are you currently a member of the Ohio Association of Realtors®? Yes \_\_\_\_ No \_\_\_\_ If yes, how long? \_\_\_\_\_

Are you currently a member of the National Association of Realtors®? Yes \_\_\_\_ No \_\_\_\_ If yes, when did you initially become a member of the National Association of Realtors®? \_\_\_\_\_

What other Board(s) have you been associated with, in what city and state? \_\_\_\_\_

Do you hold a Broker license? Yes \_\_\_\_ No \_\_\_\_ If yes, when was it issued? \_\_\_\_\_

What state? \_\_\_\_\_ Is it currently active? Yes \_\_\_\_ No \_\_\_\_ Has your membership to the National Association of Realtors® been continual, since your license was issued?

Yes \_\_\_\_ No \_\_\_\_ If no, please explain when and why? \_\_\_\_\_

What professional designations, if any, do you hold? \_\_\_\_\_

Please list all firms you have been associated with as a licensed agent, including the state and dates of each association: \_\_\_\_\_

Have you ever been refused membership in any real estate Board? Yes \_\_\_\_ No \_\_\_\_ If yes, state basis for such refusal and detail circumstances related thereto: \_\_\_\_\_

Has your real estate license, in this or any other state been suspended or revoked? Yes \_\_\_\_ No \_\_\_\_

If yes, specify the place(s) and date(s) of such action, and detail the circumstances relating thereto. (Attach sheet, if necessary.) \_\_\_\_\_



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Are there now or has there been within the past five (5) years any complaints filed against you before the state real estate regulatory agency or any other agency in government? Yes \_\_\_\_ No \_\_\_\_

If yes, specify the substances of each complaint in each state, the agency before which the complaint was made and the current status or resolution of such complaint: (Attach a sheet, if necessary.) \_\_\_\_\_

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

Are there now or has there been within the past three (3) years any Code of Ethics or Arbitration complaints filed with any Board against you? Yes \_\_\_\_ No \_\_\_\_ If yes, what Board(s), when and specify the status of said fillings at this time: (Attach sheet, if necessary.) \_\_\_\_\_

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

You are authorized to refer to the following members of the Delaware County Board of Realtors® who know me:

\_\_\_\_\_  
(Name) (Address) (Phone No.)

\_\_\_\_\_  
(Name) (Address) (Phone No.)

I understand that if I paid the \$150.00 application fee, that I will receive \$50.00 reimbursement of my application fee, *if* I attend the Board's Orientation Class within ninety (90) days of receipt of this application for membership. I further understand that I will not be accepted for probationary membership until application is completed, with all signatures, all dues, fees, copy of my license and returned to the Board's Executive Officer, presentation for final approval to be made at the next Board of Directors meeting.

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

As Broker/Manager (Designated Realtor), I understand that I am responsible for the acts, dues and membership of the applicant and that I recommend this applicant for membership to the Delaware County Board of Realtors®.

**Broker/Manager's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_