REALTORS® Association of Northeast Wisconsin and MLS, Inc.

RANW Office Use Only

Date Rcvd

AGENT CHANGE FORM - Rev July 2024

Amt Rcvd For Membership Dept. Please forward to: cdreger@ranw.org or fax to: 920-739-9149 MMSI Newsletter Chart Name _____ Agent ID Supra Billing Orientation Inactive Effective Date:

MLS Listings of Agent: Active/Pending/Withdrawn listings are retained and transferred to the Firm's MLS Participant or Office Manager. If the Participant or Office Manager wants listings transferred to another agent, please list the MLS #'s and addresses here and the Agent to whom they should be assigned:

________attach separate sheet if needer. attach separate sheet if needed **Transfer** — the \$20 transfer fee will be billed to your office unless included with this form. (Active/Pending/Withdrawn listings are retained and transferred to the Firm's MLS Participant or Office Manager) Effective Date: _____ ______ Firm Leaving Firm Joining Agent Cell / Preferred Phone _____ Agent Direct Office Phone _____ Ext ____ Fax ____ Agent Email MLS Lockbox Keyholders: The following requires acknowledgement and signatures of both Keyholder & DR/MLS Participant/Authorized Manager. This is to acknowledge to the Multiple Listing Service that, I ______(Agent Name), have a KEY and will be transferring my KEY to the new office above, subject to the Keyholder Application/Lease Agreement and to any and all MLS Rules currently in effect. I attest that the information submitted on my original Key Application is true and complete in every respect, and that since that time, the following circumstances apply (please complete the following): Arrests, Convictions, and Pending Criminal Charges Within the Past Seven (7) Years (If unsure of the nature of the offense, contact the municipality/county where it occurred) Have you been arrested for a misdemeanor or felony crime in the past seven (7) years? Yes _____ No ____ Are criminal charges now pending against you? Yes ____ No ____ Have you been *convicted* of a misdemeanor or in the past seven (7) years? Yes ____ No ____ **Regulatory Agency Limitations of License** Are there any limitations or conditions on your real estate license, or appraisal license or certification issued by the State of Wisconsin Department of Safety & Professional Services?

Yes _______No_____ If you answered "yes" to having limitations or conditions, attach a copy of the limitations/conditions with details as set forth by the Wisconsin Department of Safety and Professional Services. If you have answered "yes" to having been arrested and/or convicted of a criminal act, misdemeanor or felony within the past seven (7) years, you are required to fill out the "Application Addendum Report of Criminal Arrests, Convictions, and/or Pending Charges" and submit all relevant information, subject to review and consideration by the Board of Directors to continue using the lockbox key. Keyholder / Transferee Signature Date Participant: As the new responsible DR/MLS Participant/Authorized Manager, I hereby accept and assume all rights, risks, liabilities and obligations pursuant to the Keyholder Lease Agreement currently in effect for the above-mentioned Agent, the Electronic Lockbox System and iBox Agreement for MLS Company Participants, the MLS Company Participation Agreement, and all Rules and Regulations currently in effect, which are subject to change from time to time. MLS Participant/Authorized Manager (Name)

* By signing this document electronically, I understand and agree that my electronic signature is legally binding and is the legal equivalent to a traditional paper and ink signature. I further swear that I am in fact the undersigned individual. Info can be updated (except name change) on RANW's Member Portal: https://mdweb.mmsi2.com/ranw/ **Agent Information Update** _____ City _____ Zip ____ County _____ Home Address _____ _____ Website _____ Email Name Change _____