



# Cleveland County Association of REALTORS®, Inc.

P.O. BOX 2407, Shelby, NC 28151-2407

Phone: 704-481-9335 email: officeccar@gmail.com

## APPLICATION FOR PRIMARY MEMBERSHIP

I hereby apply for **Primary REALTOR®** Membership in the Cleveland County Association of REALTORS®, Inc. hereafter referred to as CCAR, enclosing my check for a Total of \$ \_\_\_\_\_ which includes a one-time application fee of \$50.00 which is nonrefundable, and my prorated annual membership dues for the Cleveland County, North Carolina, and National Associations of REALTORS®. In the event of non-election, my realtor membership dues only will be refunded to me.

I will attend an orientation class within 1 (one) year of the Association’s confirmation of my membership if required. Failure to meet this requirement may result in having my membership terminated. In the event of my election, I agree to complete a mandatory Code of Ethics Course prior to Orientation, to abide by the Code of Ethics of the National Association of REALTORS®, which include the duty to arbitrate, and the Constitution, Bylaws and Rules and Regulations of the above named Board, the State Association and the National Association, and if required, I further agree to satisfactorily complete a reasonable and non-discriminatory written examination on such Code, Constitutions, Bylaws and Rules and Regulations. I understand membership brings certain privileges and obligations that require compliance, including but not limited to proper use of the term “REALTOR® and the REALTOR® logo. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements, such as orientation, not be completed within the timeframe established in the association’s bylaws. I understand that I will be required to complete periodic Code of Ethics training in addition to the initial orientation program within specified 3-year cycles as a continued condition of membership. I consent that the Association, through it’s Membership Committee or otherwise, may invite and receive information and comment about me from any member or other person, and I further agree that any information and comment furnished to the Association by any person in response to the invitation shall be conclusively deemed to be privileged and not form the basis of any action by me for slander, libel, or defamation of character.

*Note: Applicant acknowledges that if accepted as a member and he/she subsequently resign from the Board or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon applicant’s certification that he/she will submit to the pending ethics proceedings and will abide by the decision of the hearing panel. If applicant resigns or otherwise causes membership to terminate, the duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose while applicant was a REALTOR®.*

I hereby submit the following information for your consideration:

**Please fill in your name exactly as it appears on your real estate or appraisal license and attach a copy of your license to this form.**

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Real Estate License #: \_\_\_\_\_ Appraisal License #: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Personal fax: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Email Address: \_\_\_\_\_

Office Name: \_\_\_\_\_

Office Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Office fax: \_\_\_\_\_

Office email: \_\_\_\_\_ Website address: \_\_\_\_\_

Preferred Publication Mailing:  Home  Office Street  Office Mail Alternate  Member Mail Alternate

Preferred Phone:  Home  Office  Cell

Are you a principal, partner, corporate officer or branch office manager?  Yes  No

**If yes, you must also complete Part 2 of this application.**

Are you presently a member of any other Association of REALTORS®?  Yes  No

If yes, name of Association and type of membership held: \_\_\_\_\_

Have you previously held membership in any other Association of REALTORS®?  Yes  No

If yes, name of Association and type of membership held: \_\_\_\_\_

If you are now or have ever been a REALTOR®, indicate your NAR membership (NRDS) #: \_\_\_\_\_

Have you been found in violation of the Code of Ethics or other membership duties in any Association of REALTORS® in the past three (3) years or are there any such complaints pending?  Yes  No

(If yes, provide details as an attachment)

Last date (year) of completion of NAR's Code of Ethics training requirement: \_\_\_\_\_

I hereby certify that the foregoing information furnished by me is true and correct and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership if granted. I further agree that, if accepted for membership in the Board, I shall pay the fees and dues as from time to time established. **NOTE:** Payments to the Cleveland County Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. In the event I fail to maintain eligibility for membership, or discontinue membership, I understand I will not be entitled to a refund of dues and fees for any reason. I further acknowledge and understand that the Board may object to my use of any company name or Website name which, in the Board's sole determination, is confusingly similar to any name used in commerce by the Board or the Board's MLS and that the Board believes would leave the public confused.

I understand that if I am elected to membership, I will be required to take the following pledge:

***In becoming a REALTOR® I pledge myself to protect the individual right of real estate ownership and to widen the opportunity to enjoy it; To be honorable and honest in all dealings; To see to better represent my clients by building my knowledge and competence; To act fairly towards all in the spirit of the Golden Rule; To serve well my community, and through it my country; To observe the REALTORS® Code of Ethics and conform my conduct to its lofty ideals.***

By signing below I consent that the REALTOR® Association (local, state, national) and their subsidiaries, if any, (e.g., MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address or other means of communication available. This consent applies to changes in contact information that may be provided by me to the Association(s) in the future. This consent recognizes that certain state and federal laws may place limits on communications that I am waiving to receive all communications as part of my membership.

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

(Applicant's Optional Information):

Date of Birth: \_\_\_\_\_ How long with current real estate firm? \_\_\_\_\_

Previous real estate firm (if applicable): \_\_\_\_\_

Number of years engaged in the real estate business: \_\_\_\_\_

Field of Business (Specialties): \_\_\_\_\_

Languages spoken: \_\_\_\_\_

**The undersigned Designated REALTOR® hereby acknowledges that the applicant is affiliated with the firm.**

**Designated REALTOR® Signature:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

Initials \_\_\_\_\_

**PART 2: IF YOU ARE A DESIGNATED BROKER/BRANCH MANAGER, YOU MUST ALSO COMPLETE THIS PART OF THE APPLICATION**

Company information:  Sole Proprietor  Partnership  Corporation  LLC (Limited Liability Company)  
 Other, specify: \_\_\_\_\_

Your position:  Principal  Partner  Corporate Officer  Majority Shareholder  Branch Office Manager

Names of other Partners/Officers of your firm: \_\_\_\_\_  
\_\_\_\_\_

Have you ever been refused membership in any other Association of REALTORS®?  Yes  No  
If yes, state the basis for each such refusal and detail the circumstances related thereto: \_\_\_\_\_  
\_\_\_\_\_

Is the Office Address, as stated, your principal place of business?  Yes  No  
If not, or if you have any branch offices, please indicate and give address: \_\_\_\_\_  
\_\_\_\_\_

Do you hold, or have you ever held, a real estate license in any other state?  Yes  No  
If so, where: \_\_\_\_\_  
\_\_\_\_\_

Have you or your firm been found in violation of state real estate licensing regulations within the last three years? If yes, provide details: \_\_\_\_\_  
\_\_\_\_\_

Have you or your firm been convicted, adjudged, or otherwise recorded as guilty by a final judgment of any court of competent jurisdiction of a felony or other crime? If yes, provide details: \_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership if granted.

I understand that in accordance with the dues formula of the National Association of REALTORS®, the firm's Designated REALTOR® will be assessed an annual fee for each actively-licensed real estate broker or appraiser employed by or affiliated with the firm who is not a REALTOR® Member of this or any other board of REALTORS® in this or a contiguous state.

**Designated BROKER/BRANCH MANAGER Signature:** \_\_\_\_\_

**Dated:** \_\_\_\_\_

Initials \_\_\_\_\_