

CRMLS IDX REQUEST FORM

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| --- | --- |
| Agent Name: Agent User ID: Agent BRE#: Agent Phone:  | Agent Email Address: Office name: Office ID: Office BRE#:  |

 Domain name of website where data will be displayed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By signing below, I represent and warrant the following: (1) I am an active member of CRMLS in good standing; (2) I agree to abide by all CRMLS Rules and Regulations; and (3) I have permission from my broker to display MLS data on my website.

Signature of Requestor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By signing below, I represent and warrant the following: (1) I am the broker of record for the Requestor; (2) I have given permission to the Requestor to have CRMLS IDX listings on the Requestor’s website; and (3) I agree to abide by all CRMLS Rules and Regulations.

Broker Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Broker signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**My Web Site Vendor is:**

Company name: Europos Prekybos Tinklas, IJ Phone: 1 800 559-5729

E-Mail: intre.rets@gmail.com

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