



Fresno Association of REALTORS®
CRMLS APPLICATION



SELECT:

- Principal Broker Agent Clerical Appraiser

Fresno MLS Member #

Fresno MLS Office #

FEES AND PAYMENT INFORMATION

CRMLS Access: \$140.00 Semi-Annually (prorated monthly)
(Fees change on the 25th of every month)

APPLICANT INFORMATION

First Name Last Name

BRE License (if applicable)

Mailing Address City State Zip

Direct Office Phone Cell

Home Phone Fax

E-Mail Website

Need to transfer account info from another CRMLS account? YES NO

If yes, please fill out transfer form and provide a letter of good standing from the originating association. These forms can be found at www.fresnomls.net/wp/CRMLSMemberTransfer.pdf and www.fresnomls.net/wp/CRMLSLoGS.pdf, or request them from staff.

Broker a current member of CRMLS? YES NO

If yes please state what Association

OFFICE INFORMATION

Office Name

Office Address City State Zip

Office E-Mail Office Website

Office Phone Office Fax

GENERAL TERMS AND CONDITIONS

I agree to abide by the CRMLS Rules and Regulations.

I am responsible for the security of my login information and will not share or make it available to any person.

Applicant Signature Date

Office Broker Signature Date

# Avoid Late Fees!

Automatically charge fees to your credit card

Check any boxes that apply:

- All MLS Recurring Semi Annual fees (May 1st & November 1st) \*CRMLS and Clerical MLS included
- MLS-Touch App fee (Charged to MLS only members: May 1st & November 1st)
- FAR Member Websites
- RETS Feed (May 1st & November 1st)
- Key Access Billing (March 1st)
- Real Estate Guide (date varies)
- Events, Classes, Seminars
- Store Items Purchased
- New Application Start-up fees (One time charge in the amount of \$\_\_\_\_\_)

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I hereby authorize Fresno Association of REALTORS® to charge the credit card listed below

**All recurring MLS fees will be charged immediately on the dates listed above.**

**I understand that I am responsible for keeping a current card on file with the Fresno Association of REALTORS®**

Member Name: \_\_\_\_\_

Member number: \_\_\_\_\_

Credit Card Type:  **Visa**    **Mastercard**    **American Express**    **Discover**

Credit Card # \_\_\_\_\_

Expiration date: \_\_\_\_\_ CVC Code: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

Print: \_\_\_\_\_



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