

THE KNOXVILLE AREA ASSOCIATION OF REALTORS®
609 Weisgarber Road, Knoxville, TN 37950-0910
865-584-8647

DESIGNATED AFFILIATE MLS KEY APPLICATION

Name of Company: _____ Company License number: _____

Designated Affiliate Name _____ License/Certification # _____

Address of Company: _____

Phone number: _____ Fax # _____

E-Mail Address: _____

State position with firm: Owner Partner Corporate Office Trustee Employee

Are you actively engaged in the Housing Industry Business? Yes No

What business are you licensed/certified in? Home Inspector Pest Control Inspector

State the name of each Owner, Principal, Partner, Corporate Officer or Trustee of your Company.

You are authorized to refer to the following members of this Association's MLS who know me.

(Name)	(Address)	(Phone)
_____	_____	_____
_____	_____	_____

I agree that, if accepted for Affiliate MLS Key Membership in the Association's MLS, I shall pay the fees and dues as from time to time established and I shall adhere to the Rules and Regulations of the Multiple Listing Service.

Signature of Designated Affiliate MLS Key Member

(Date)