

Revised 3/10/2022

This form is to be used for administrative assistants performing clerical duties for a single office. Please complete this form and fax it to (508) 845-2434. If you have any questions, please call MLS PIN Membership at (800) 695-3000 option 3.

Office Address:State:Zip: City:State:Zip: Office Telephone #:	Office Name:	MLS Office ID #:			
City: State:  Zip:    Office Telephone #:	Office Address:				
Name of Administrative Assistant:	Office Telephone #:				
Name of Administrative Assistant:	Name of Administrative As	ssistant:			
Do you have a real estate license? (Please circle one) YES or NO	Do you have a real estate	icense? (Please circle one) YES	or NO		
License #: Type of License: Expiration Date:	License #:	Type of License:	Expira	ition Date:	
Will you be performing duties that under Massachusetts license law require a real estate license? ( <i>Please circle one</i> ) YES or NO What duties are you performing as an administrative assistant?	(Please circle one) YES or	NO			

MLS PIN will be assigning an Administrative ID number and password to you within 24-48 hours. Please provide an e-mail address so we can notify you with this information when your application has been processed:

Email Address: \_\_\_\_\_

Please have the Principal sign this application. By signing this application, the undersigned will be authorizing MLS PIN to assign you an Administrative ID number linked directly to the office listed above which will allow you access to all Subscribers within this office and all of their MLS PIN ID numbers as well as access to their accounts including listing maintenance.

Name of Participant or Office Manager (Please Print)

Signature of Participant or Office Manager

Date