

Assignment of Listing Rights & Authorized Signer Form

For MLS Use Only

Member # _____

Office # _____

Fax or Email completed form to Admin Center	Amador AOR	(209) 223-3876 / acar@metrolist.net	Nevada AOR	(530) 272-2646 / ncaor@metrolist.net
	Central Valley AOR	(209) 858-1709 / cvar@metrolist.net	Placer AOR	(916) 624-8023 / pcar@metrolist.net
	El Dorado AOR	(530) 676-0180 / edcar@metrolist.net	Sacramento AOR	(916) 283-8812 / sar@metrolist.net
	Lodi AOR	(209) 368-8289 / lar@metrolist.net	Sutter-Yuba AOR	(530) 674-4304 / syaor@metrolist.net
	LAR Modesto Branch	(209) 523-5317 / modesto@metrolist.net	Yolo AOR	(530) 666-7444 / ycar@metrolist.net

THIS FORM MAY ONLY BE COMPLETED BY A BROKER/APPRaiser PARTICIPANT

I, _____ am the Responsible Member for the below mentioned
Print Name

Office(s), would like to grant the following Listing Rights and/or individual(s) authorization to sign MetroList applications and change forms on my behalf.

Type of Request

Agents Listing Rights Assign Authorized Signer(s)

Office Requested For

This request is for the following Office(s): All Offices This Office ONLY

Office Name _____ MLS Office ID _____

Office Address _____

Agents Listing Rights

All Agents within the Office(s) are to have the following Listings Rights:

Full Listings Add & Modification Rights Listing Add Only Rights

No Listings Rights, should only have Search Rights Listing Modify Only Rights

Authorized Signer(s)

Grant the following individual(s) to sign on my behalf for the above mentioned Office(s)

Authorized Name _____ MLS Agent ID _____

Office Manager (One per Office) Signer

Authorized Name _____ MLS Agent ID _____

Authorized Name _____ MLS Agent ID _____

Authorized Signer - Signature _____ Date _____

If Non-MetroList Subscriber must be approved and reside outside MetroList's primary county

**** See Attached for additional Offices and/or Signers ****

Responsible Participant Signature

Responsible Participant Signature Print Responsible Participant Name Date