



Broker Change Form

Date _____

Change Broker/Designated REALTOR® or Office Manager

Company Name _____

Previous Broker/Designated REALTOR® _____ Member ID _____

New Broker/Designated REALTOR® _____ Member ID _____

Previous Office Manager _____ Member ID _____

New Office Manager _____ Member ID _____

Previous Broker/Designated REALTOR® Signature _____

New Broker/Designated REALTOR® Signature _____

New Office Manager Signature _____

Please submit a copy of the New Designated Broker's license along with this form to Greater Lakes Association of Realtors®.

Multiple Listing Service Confidentiality/Service Agreement

I understand that if I, or any licensee affiliated with my firm, share information or use of the Service with persons **NOT** affiliated with the Service, my participation shall automatically be revoked, and I will be subject to action by the Professional Standards Committee in accordance with the Bylaws of the Association.

I also understand that only myself and only agents participating and paying for the Service will be able to access and place their listings in the Service. Your participation in MLS will be revoked if you allow any non-paying agent access to MLS.

This agreement can be terminated by either party giving 30 days written notice to the other party.

I shall pay the monthly subscription fee for each licensee affiliated with my company. To be paid prior to the 20th of each month or late fees will be added and if not paid by the 30th of the month service will be disrupted for each licensee affiliated with my company until service fees and late fees are paid in full.

I agree to abide by all the Bylaws, Rules and Regulations, the Code of Ethics and directives as established and as in existence and as may be amended from time to time. I also agree to keep all listings current and in proper order as provided by said Rules and Regulations.

Applicant's signature _____ Name of Company _____

Date: _____

STATE OF MINNESOTA DEPARTMENT OF COMMERCE 85 – 7th Place East, Suite 280 St. Paul, Minnesota 55101 651-539-1599		Request to Change Primary Broker
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Licensees are required to notify the Commerce Department in writing of any company change within ten days of the change. This form is used to change the Primary Broker that is responsible for the listed Real Estate Company and the agents. **The entire form must be completed.**

- Submit this completed form by e-mail to licensing.commerce@state.mn.us with “REAL ESTATE PROCESSING” in the subject field.
- The new primary broker must be an owner or elected officer of the company listed below and must already be licensed as a real estate broker.
- If the ownership is changing, please complete a “Notification of Change in Owner, Partner, Officer, or Director for Real Estate Company Licensee” form (available on the Commerce Department website) and submit it with this form.

Company Name	Company License #

CURRENT PRIMARY BROKER

This individual will no longer act as the primary broker for the company listed above.

- Will this individual remain with the company after the primary broker has changed?

YES ☐ **NO** ☐

Please note that if the individual will not remain with the company after the primary broker has changed, the individual's license will be made inactive.

Legal Name	Individual License #	Officer's Title

NEW PRIMARY BROKER

This individual will become the primary broker for the company listed above and will comply with the responsibilities that are required for a primary broker under Minnesota Statutes §82.

Legal Name	Individual License #	Officer's Title

CERTIFICATION & SIGNATURES

I certify that all the information provided on this form is true and complete.

NEW PRIMARY BROKER _____ DATE _____

FORMER PRIMARY BROKER _____ DATE _____



GREATER LAKES
ASSOCIATION OF REALTORS®

15344 Pearl Drive, Baxter, MN 56401
office@greaterlakesrealtors.com
www.greaterlakesrealtors.com
218-828-4567

MLS Auto Pay Authorization

Auto Pay Authorization Form*

Designated Broker Name: _____ NRDS# _____

Company Name: _____ Phone Number: _____

I, _____, authorize the Greater Lakes Association of REALTORS® to charge my credit card for the monthly MLS fees for all those licensed at _____ on an ongoing basis. Any new licensed members will automatically be added to my autopay. I understand that this form is valid as long as I am a member of the Greater Lakes Association of REALTORS® or until I notify GLAR in writing to cancel the Auto Pay service.

Please allow up to 30 days from the date received by GLAR for the Auto Pay Service to take effect.

In the event a payment is declined for any reason, you will be responsible for making the payment online. For your records, you will still receive invoices while enrolled in the service. To prevent service fees and/or service interruption and reinstatement fees, please update your payment information via the member portal (<https://greaterlakesrealtors.com/>), or call GLAR with **ANY CHANGE** to your credit card information.

All fees & charges are non-refundable.

Signature: _____ Date: _____

**To be enrolled in the Auto Pay Service for your monthly MLS fees this form is to be signed and sent to the Association. You will want to make sure that you have saved your credit card information on the member portal or call the association with your credit card information and we can set it up for you.*

***Please note your credit card information is retained in E-Commerce. The Association does NOT retain credit card information.*

Please return this form to: office@greaterlakesrealtors.com