



**ADIRONDACK-CHAMPLAIN VALLEY  
MULTIPLE LISTING SERVICE  
APPLICATION FOR MLS PARTICIPATION**

(Please print)

**MLS Subscriber's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Fax:** \_\_\_\_\_ **License:** (please attach copy) \_\_\_\_\_

MLS subscribers (agents/appraisers) must join under a Participating Broker-Owner or Participating Appraiser. If you are not the **Participant** (Firm Broker or Appraisal Owner) please note:

**Participant's name:** \_\_\_\_\_

**Office address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Website address:** \_\_\_\_\_

Primary board membership is held in: \_\_\_\_\_

Please indicate your NAR membership#: \_\_\_\_\_

I hereby certify that I am a member in good standing with the \_\_\_\_\_

(Name of local board) and that the foregoing information furnished is true and correct. I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of participation in the ACV Multiple Listing Service.

I have reviewed the ACV Multiple Listing Rules and Regulations and agree to abide by the provisions set forth therein.

**Signature:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

**Return to:** Adirondack-Champlain Valley MLS

Phone: (518) 561-8777

25 Margaret Street, Suite 2 Fax: (518) 561-0107

Plattsburgh, NY 12901 E-mail: [admin@ccbr.us](mailto:admin@ccbr.us)

*MLS-only fees are \$654 per year, pro-rated monthly at time of membership. New Office Fee: \$100*