

Central Pasco Association of Realtors UNLICENSED ASSISTANT/USER APPLICATION

EMPLOYER INFORMATION: Employer Name: NAR#: Employer Address: ______Street/P. O Box/Apt. City State Zip Employer Phone: _____ Fax#: ____ E-Mail: _____ Web: ____ ASSISTANT/USER INFORMATION (check one) □ Personal Assistant (access to only one agent's listings) ☐ Office Assistant (access to all listings owned by this office) Company Assistant (access to all listings owned by this office and any branch offices) Assistant Name: _____ Agent or office assistant is assigned to: Office Phone: _____ Fax: _____ Home Address: Citv Street/P. O Box/Apt. State Zip (Required to verify against DBPR records) E-Mail: **SIGNATURES** Broker Signature _____ Date __/__/

** Please return this form to your local association/board with a copy of assistant's driver's license, \$65.00 set up fee plus prorated annual fee. Assistant user fee of \$100.00 will be due annually September 30th. Please contact your local association/board for the current fees.

Assistant Signature _____

Date / /

There is a CPAR processing fee of \$50.00.



CREDIT CARD AUTHORIZATION FORM

You are authorizing charges to your credit card for your Central Pasco Association of Realtors Unlicensed Assistant processing fee of \$50.00.

Cardholders Name:		
Card Billing Address:		
NRDS# or License #:		
Office Name:		
Contact Phone #:		
Email:		
Credit Card #:		
Expiration Date:	Security Code:	
Card Holders Signature:		