

GUAM ASSOCIATIOIN OF REALTORS®

153 Martyr St., Suite 201, Hagåtña, Guam 96910 Office: (671) 477-4271 • Fax: (671) 477-4275



website: guamrealtors.com

APPLICATION FOR REALTOR® MEMBERSHIP

TYPE OF APPLICATION

Check	ck all applicable boxes:				
	☐ REALTOR® ☐ A ☐ Broker ☐ Associate Broker ☐ Sales Agent	Appraiser			
	☐ Other:	_			
	GENERAL IN	<u>FORMATION</u>			
1.	PERSONAL				
Name (as it appears on your license)					
First:	: Middle:	Last:			
Home	ne Address:				
Person	onal Email:				
Home/Mobile number: Birth Date (M/D/Y):/					
2.	OFFICE/FIRM				
Name:	me: (This is the broker/brokerage name under which you will be doing business and under which DRT has issued your license and/or approved your DBA.)				
Nickna	name (DBA):				
Addre	ress:				
Office	ce Number:	_Fax Number:			
Rusine	ness Email:	Website			

List all other DBAs:				
Preferred primary phone? ☐ Office ☐ Home/Mobile ☐ Other:				
Preferred mailing? ☐ Office ☐ Home ☐ Other:				
3. PROFESSIONAL	PROFESSIONAL			
Please list your applicable license(s) corresponding with this application:				
☐ Broker's License, RE License #:	Expiration Date:			
☐ Salesperson's License, RE License #:	Expiration Date:			
☐ Appraiser's Certificate/License #:	Expiration Date:			
Please list Professional Designations: (ex: GRI, CRS, etc.)				
Primary Specialty:				
Residential Commercial/Industry Farm and Land Duilding and Development Property Management Appraising Mortgage Financing Other(s) (please specify):				
4. BROKER/APPRAISER PARTICIPANT				
Persons other than principals of real estate or appraisal firms and who hold a valid Guam Real Estate license or Appraiser certificate/license must remain employed by or affiliated with a REALTOR® Office/Firm to be eligible for REALTOR® membership.				
(Note: at the end of the application, those names below will be necessary signers of this application)				
Name of Broker or Appraiser participant:				
RE or Appraiser Certificate/License #:				
☐ Sole Proprietor ☐ Partnership ☐ Corporation ☐ LLC (Limited Liability Company)				
☐ Other, specify:				
Name of other Partners/Officers of your firm:				
5. BACKGROUND				
Do you hold, or have you ever held, a real estate license in any other state? \Box Yes \Box No				
If so, where and when?				

Are you a previously or presently (circle one) a member of any other Association of				
REALTORS®? □ Yes □ No				
If yes, what is the name of the association and type of membership held:				
I certify that I have NO record of official sanctions rendered by the courts or other lawful authorities for violations set forth below:				
(i) I have no record of official sanctions for violations of civil rights laws within the last				
three (3) years. □ True. I certify. □ False. I cannot certify.				
(ii) I have no record of official sanctions for violations of real estate license laws within the last three (3) years.				
☐ True. I certify. ☐ False. I cannot certify.				
(iii) I have no record of criminal convictions within the past ten years.				
☐ True. I certify. ☐ False. I cannot certify.				
If you could not certify any of the above, please attach additional sheets with all relevant details about the violation(s), including the date(s), type of violation(s), and a copy of the discipline, if any.				
Have you ever been disciplined or refused membership by any Boards/Associations or MLS?				
\square Yes. If yes, attach copies of the discipline. \square No.				
Have you ever been disciplined by the Department of Revenue and Taxation Real Property Division?				
\square Yes. If yes, provide all relevant details and dates (or attach copies of discipline). \square No.				

GENERAL TERMS AND CONDITIONS OF MEMBERSHIP

1. **Bylaws, policies, and rules.** When applying for Designated REALTOR® and REALTOR® membership, upon acceptance and payment of all dues and assessments, I will automatically become a member of the Guam Association of REALTORS®. I agree to abide by the laws, policies and rules of the Association, the bylaws, policies and rules of the Guam Association of REALTORS®, including the Code of Ethics and Standards of Practice of the National Association of REALTORS® and the constitution, bylaws,

policies and rules of the National Association of REALTORS®, including the NAR® Code of Ethics, all as many from time to time be amended.

- 2. **Use of the term REALTOR®.** I understand that the professional designations REALTOR® are federally registered trademarks of the National Association of REALTORS® ("NAR") and use of these designations are subject to NAR rules and regulations. I agree that I cannot use these professional designations until this application is approved, all my membership requirements are completed, and I am notified of membership approval in one of these designations. I further agree that should I cease to be a REALTOR®, I will discontinue use of the term REALTOR® in all certificates, signs, seals or any other medium.
- 3. **Orientation.** I understand that if the Association of the MLS requires orientation, I must complete such orientation by the deadline set by the Association. I understand that unless or until I complete required orientation, my application for membership will not be granted, including that in the event an Association or MLS granted any introductory provisional membership pending timely completion or orientation, that said provisional membership will be dropped upon expiration of the deadline set.
- 4. **License Validity.** I understand that if my license is terminated, lapses or inactivated at any time, my REALTOR® membership and/or MLS participation/subscription is subject to immediate termination.
- 5. **Dues and Fees**. I understand that if my application is approved, there are regular dues and fees required for membership and are payable as established by the GAR Board of Directors.

Applicant's	initials	
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6. **No refund**. I understand that my Association membership dues and MLS fees are nonrefundable. In the event I fail to maintain eligibility for membership or for MLS Services for any reason, I understand I will not be entitled to a refund of my dues or fees.

Applicant's initials _____

Authorization to release and use information; waiver. I authorize the Association or 7. its representatives to verify any information provided by me in this application by any method including contracting the Guam Department of Revenue & Taxation Real Estate Division, my current or past responsible broker or designated REALTOR®, or any Association or MLS where I held, or continue to hold, any type of membership. I further authorize any Association or MLS where I held, continue to hold, any type of membership to release all my membership or disciplinary records to this Association, including information regarding (i) all final findings of Code of Ethics violations or other membership duties within the past three (3) years; (ii) pending ethics complaints (or hearings); (iii) unsatisfied discipline pending; (iv) pending arbitration requests (or hearings); and (v) unpaid arbitration awards or unpaid financial obligations. I understand that any information gathered under this authorization may be used in evaluating my application for membership and future disciplinary sanctions. I waive the legal claim or cause of action against the Association, its agents, employees or members including, but not limited to, slander, libel or defamation of character, that may arise from any action

taken to verify, evaluate, or process this application or other use of the information authorized and released hereunder.

By signing below, I expressly authorize the Association/MLS, including the local, state and national, or their subsidiaries or representatives to fax, e-mail, telephone, text, or send the U.S. mail to me, at the fax numbers, e-mail, telephone and text numbers and addresses above, for any and all Association/MLS (including the local, state and national, or their subsidiaries or representatives) communications, including but not limited to those for political purposes and/or material advertising the availability of or quality of any property, good or services offered, endorsed or promoted by the Association/MLS (including the local, state and national, or their subsidiaries or representatives).

SIGNATURE

I certify that I have read and agree to the terms and conditions of this application and that all					
information given in this application is true and correct.					
Signature of Applicant	Date of Signature				

Principal Broker/Appraiser Participant Signature