

IDX Paperwork Cover Sheet

IMPORTANT

This cover sheet **MUST** be filled out and returned via Email or Fax with your IDX paperwork. If this cover sheet is not included your IDX may not be approved and set-up properly.

How To Return

Scan & Email Cover Sheet & Paperwork to: IDXAdmin@z57.com

Fax Cover Sheet and Paperwork to: (858) 430-5599

Please Print Clearly

First Name: _____ (REQUIRED)

Last Name: _____ (REQUIRED)

Email Address: _____ (REQUIRED)

Domain Name: _____ (REQUIRED)

IF FACEBOOK PREMIUM CLIENT, PLEASE USE YOUR FACEBOOK BUSINESS PAGE URL AS THE DOMAIN NAME

MLS Agent ID: _____ (REQUIRED)

Office ID: _____



Contra Costa Association of REALTORS®

Multiple Listing Service

IDX (Internet Data Exchange) Consultant/Participant Information and Signature Page

Consultant Company Name: _____

Consultant Name: _____ Title: _____ E-mail address _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Server IP address (used to access RETS data): _____ Company URL _____

I CERTIFY THAT I HAVE RECEIVED A COPY OF THE FULL "DATA ACCESS AGREEMENT FOR INTERNET DATA EXCHANGE (IDX)" TO WHICH THIS SIGNATURE APPLIES AND THAT I AGREE TO ABIDE BY THE RULES AND GUIDELINES SET FORTH WITHIN THAT AGREEMENT AND THE ASSOCIATED POLICIES AND DOCUMENTS.

Consultant Signature _____

Print Name _____

Date: ____/____/____

Firm Name (as seen on the MLS): _____ Office Code: _____

Participant (DR) Name: _____ MLS Login ID: _____ Title: _____

Subscriber Name: _____ MLS Login ID: _____

(If different than Participant)

Participant's E-mail address: _____ Subscriber's E-mail address: _____

Firm Street Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Websites requesting IDX data display:

http:// _____ http:// _____

http:// _____ http:// _____

http:// _____ http:// _____

http:// _____ http:// _____

http:// _____ http:// _____

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This Agreement is entered into on behalf of the above-identified Firm by:

Participant = Broker
Subscriber = Agent

Participant Signature _____

Date: ____/____/____

Subscriber Signature _____

Date: ____/____/____