

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: _____



Broker Authorization Form

As Broker/Owner of the office(s) listed below, I hereby acknowledge membership in one of the three MLS's provided by either JTHS, RAPB or RASL and I authorize South Florida MLS to provide **CONSTELLATION WEB SOLUTIONS** the Licensed Content for the purpose of creating and developing a website or other electronic means of display for the undersigned or his/her agents the undersigned authorizes.

My signature below represents that I am the Broker/Member or represent I have the Broker/Member's consent to grant this authorization. This consent and authorization is subject to the terms and conditions contained in the Agreement between South Florida MLS and **CONSTELLATION WEB SOLUTIONS** for the licensing of Broker/Member's Licensed Content and SOFLMLS Rules and Regulations.

Broker info and signature required

BROKER/OWNER INFORMATION

Brokerage Name: _____ Office Code: _____
 Designated Broker: _____ Broker DRE: _____
 Regional MLS Member ID: _____
 Street Address: _____
 City, State, Zip: _____
 Office Phone: _____
 Broker Email: _____
 Designated Broker Signature: _____
 Print Name: _____
 Signed: _____
 Date: _____
 Broker URL: _____

BROKER AUTHORIZATION FOR AGENT WEBSITE / ELECTRONIC MEANS OF DISPLAY

This certifies that the Agent below is actively participating in the buying and selling of real estate, is working under my broker designation and is an active member of SOFLMLS in good standing. The named Agent has my permission, as the designated broker for the office above, to display Licensed Content on the named Agent's personal website.

This form does not allow an Agent to receive, copy, host or otherwise have access to the SOFLMLS Database for Licensed Content. In order to display Licensed Content, the Agent must use one of the following methods:

Check one:

- Frame the website of the authorizing broker, or
- Have a website developed by Licensee named above

Agent Information

Authorized Agent Name: _____
 Regional MLS Member ID: _____
 Authorized Agent Email: _____
 Authorized Agent URLS: _____

SOFMLS Staff Approval: _____ **Title:** _____

All Parties understand and agree that only domain name URLs of SOFLMLS Broker and Agents disclosed to SOFLMLS shall be provided Licensed Content by **CONSTELLATION WEB SOLUTIONS**