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 Reciprocity Web Site
Consultant Information and Signature

**NOTE TO FIRM: Reproduce this page for each individual/company
to whom you intend to provide access to the BR Data under this Agreement.**
This form will be accepted only if all fields are completed.

Consultant (company or individual) Name:

Constellation Web Solutions

E-mail address: brokersolutions@constellationws.com
(You **must** supply an e-mail address here. This address will be CCMLS's principal means of communicating with you for notices under this Agreement.)

Consultant Street Address: 6737 West Washington St, Suite 2120

Consultant City, ST, ZIP: Milwaukee, WI 53214

Phone: 425-636-6910   Fax: 866-299-4385

Consultant(s) Contact Name Phone Number or E-Mail

Dan Dlhy, Data & Compliance Manager
brokersolutions@constellationws.com
425-636-6910

Site is being developed for client:

Client's Name:

Real Estate Office:

Real Estate Address:

URL Address for this Web Site:

NOTE TO CONSULTANT: Be sure to enter into this Access to Broker Reciprocity data feed contract with CCMLS and every real estate broker to which you provide services. By signing this agreement you are agreeing to comply with section 16 of the CCMLS Rules and Regulations located in the Broker Reciprocity Documentation. Failure to comply with these rules will result in termination of access to the MLS data available via RETS.

Entered into on behalf of Consultant by:

Daniel Dlhy (signature)

Signature (Consulting Firm Representative)   Date

Daniel Dlhy
Print Name

Data & Compliance Manager
Title