

Bay Area Real Estate Information Services, Inc. (BAREIS MLS®)

Standard Reciprocal Listing Application

Please Email to dataentry@norcalmls.com or Fax to (707)577-0140

Please write legibly and fill all fields. Applications that are incomplete or illegible cannot be processed.

A minimum of two business days is required to process your listing, provided the reciprocal listing information/documents have been completed and payment received.

Agent Name: _____

BRE Lic #: _____ Agent Phone: _____

Email: _____

Brokerage Name: _____

Designated Broker/Manager Name: _____

Broker BRE Lic #: _____ Broker Phone: _____

A standard reciprocal listing application will allow your listing to be entered onto BAREIS MLS and will be visible in BAREIS products and to data share MLSs. You will not have access to BAREIS MLS or BAREIS MLS information. BAREIS will not send your listing to public portals or IDX websites. Please check with your home MLS for syndication options.

You are required to follow the BAREIS listing rules which may be viewed at <http://bareis.com/rules>. The BAREIS MLS® lockbox rule can be found [here](#).

If you are a member of **METROLIST, MLS LISTINGS INC., SFARMLS, BridgeMLS, BAY EAST, CCAR, Sutter/Yuba, or Nevada County** you already have direct access to BAREIS to enter listings. No additional forms or fees are required. You may access the BAREIS MLS® system by clicking the BAREIS logo under the single sign-on link from your MLS (For Paragon users, click on Resources). For additional information on entering listings directly into BAREIS, please contact your MLS staff.

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Standard Reciprocal Credit Card Authorization

Please Email to dataentry@norcalmls.com or Fax to (707)577-0140

I, _____, authorize **Bay Area Real Estate Information Services** to charge my **Visa or Master Card** for the **\$75.00** fee associated with placing my listing into the BAREIS MLS system.

Credit Card Number _____

Expiration Date _____ / _____
Month Year

Name as it appears on card: _____

Please circle one: VISA MASTERCARD

Signature _____
Required!

Mandatory: Billing address of Card Holder is required.

Address: _____

City _____ **Zip** _____