



OFFICE APPLICATION

Office Name _____ Office ID# _____

Office Trade Name (dba) _____

Office Mailing Address _____

(PB/BIC/DR mail will be sent to office mailing address)

Office Location Address _____

Office License #: RB- _____ Office Phone # _____ Fax # _____

Email Address _____ Web Address _____

Principal Broker (Designated REALTOR®) _____

I am: Designated REALTOR® for a new Office **OR** Replacement Designated REALTOR® for an existing office

Last Four Digits of PB/BIC/DR Social Security # _____ Cell Phone # _____

(HRS §467-12: (a) A licensed real estate broker shall have and maintain a definite place of business in the State, in compliance with the rules of the REC, and shall display therein the real estate broker's license and upon request make available any associating real estate salesperson's license; (b) No real estate broker's branch office shall operate without a registration previously obtained under and in compliance with the rules of the REC.)

THE FOLLOWING LICENSEES ARE AFFILIATED WITH MY OFFICE (attach additional sheet, if necessary):

RAM & MLS FEES ARE AS FOLLOWS:

1. RAM – OFFICE INITIATION FEE \$ _____

- \$200: New Office
- \$50: Reactivating Office

2. MLS – OFFICE PARTICIPATION FEE \$ _____

- \$320: New Office
- \$320: Reactivating Office after 180 days of placing office inactive
- \$160: Reactivating Office within 180 days of placing office inactive

TOTAL DUE for OFFICE FEES \$ _____

If person opening office is a: current Association member, they do not have to complete a membership application
 new Association member, they must complete a membership application & pay appropriate dues
 reactivating Association member, they must complete a membership application & pay appropriate dues

METHOD OF PAYMENT: MasterCard VISA AMEX Cash Check # _____

CREDIT CARD # _____ EXP. DATE _____

NAME ON CREDIT CARD _____

RAM OFFICE APPLICATION (continued)

I UNDERSTAND and AGREE THAT:

1. My office is located in a business zoned area or My office is located in a residential zoned area;
2. I will notify RAM within ten days of the effective date of any change in my office location;
3. I will notify RAM within ten days of the effective date of any new agents licensed with my office or when agents leave my office (I will submit a copy of the DCCA Change Form);
4. I will notify RAM when I plan to be absent from my office for more than thirty calendar days, and will advise them of the name of the Broker-In-Charge in my absence;
5. I have received a copy of the Bylaws of the REALTORS[®] Association of Maui, Inc., and agree to adhere to the policies therein;
6. In addition to my personal dues, my annual dues as a Designated REALTOR[®] will be based on the number of non-Association member licensees affiliated with my office ("Article X – Dues, Fees and Finances, Section 2. Dues");
7. I will have any new agent licensed with my office apply for provisional membership within one month from the date the agent became licensed with my office, or I will be assessed from the date that the agent was actively licensed with my office (not to exceed one year);
8. My annual dues are due by September 30th of every year;
9. A RAM charge account will automatically be setup under my office name, and I will be financially responsible for same.

MLS MEMBERS ONLY: I have received a copy of, and agree to conform to, the Rules and Regulations of the Multiple Listing Service, and understand that the MLS is a service provided only for Members of the REALTORS[®] Association of Maui.

RESPONSIBLE REALTOR[®] SIGNATURE _____ **Date** _____

Check One of the Following and Complete Section(s) Below:

- SOLE PROPRIETORSHIP** (complete Section A only)
- PARTNERSHIP** (complete Sections A & B) List or attach names & addresses of all partners: _____

- CORPORATION** (complete Sections A & B) List or attach name(s) of Officers: _____

- LIMITED LIABILITY COMPANY (LLC) OR LIMITED LIABILITY PARTNERSHIP (LLP)** (complete Section A & B) List names of members &/or managers, if applicable: _____

NOTE: RAM/NAR Bylaws state: "All persons who are partners in a partnership, or all officers in a corporation, who hold an active real estate license in the State of Hawaii, are required to hold REALTOR[®] Membership."

RAM OFFICE APPLICATION (continued)

SECTION A.

Office Name _____ Date _____ Office ID# _____

PB/BIC (DR) _____ Signature _____

Indicate your Position with the Company:

- Principal Partner Corporate Officer Branch Office Manager
- Other _____
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SECTION B. (Partnerships, Corporations, Limited Liability Companies/Partnerships)

(Sole Proprietors do not need to complete this section)

“Resolved that (broker) _____, license number _____, shall be appointed by the corporation, who shall be, at all times, a holder of a valid and subsisting real estate broker's license of the State of Hawaii. His or her general duties and powers shall be to directly control, supervise, and manage the real estate phase of the corporation's business at all times. His or her specific duties and powers shall include:

- 1) full knowledge and control of the corporation's accounting practice;
- 2) full knowledge and control over the moneys and other considerations belonging to its clients and in the custody of the corporation;
- 3) full access to all books, records, and documents materially relative to the corporation real estate business; complete authority to accept or deny listings of properties for sale, to process offers to purchase, to close all real estate transactions, and to disburse all funds derived from real estate transactions.

Officer's Name _____ Title _____
(print or type)

Officer's Signature _____ Date _____

1) **Have you or your firm** been found in violation of state real estate licensing regulations within the last three (3) years? No. Yes (provide date & details). _____

2) **Have you or your firm** been convicted, adjudged, or otherwise recorded as guilty by a final judgment of any court of competent jurisdiction of a felony or other crime. No. Yes (provide date & details). _____

RAM CHECKLIST (staff use only)

GIVE COPIES OF SECTION 1 TO OFFICE JOINING RAM

1. OFFICE APPLICATION

- Review fees prior to having application completed
 - Give copy of completed application & MLS form to applicant
 - Give Office packet to applicant
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2. COMPUTER

- Review MLS form
 - Review MLS info of previous office
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NEW OFFICE SET-UP

- Set-up office in MMSI (take info on application)
 - Add Office as a member in MMSI
 - Check DCCA web-site for correct office info (formal name, trade name, license #)
 - go to: <http://hbe.ehawaii.gov/cogs/search.html> (search for a business) type in company name and search.
 - Print General Information screen that shows Officers & staple to office ap
 - Transfer agents if any to new office
 - Put Office ID# on application
 - Add DR to office info
 - Do Paragon transfer
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REACTIVATE OFFICE:

- Make corrections of info on application to MMSI
- Reactive Office as a member in MMSI
- Add DR to office info
- go to: <http://hbe.ehawaii.gov/cogs/search.html> (search for a business) type in company
- Transfer agents if any to new office
- Put Office ID# on application
- Correct phone & fax #'s
- Do Paragon transfer

DESIGNATED REALTOR:

- Active RAM member
 - Mailing address shows as office
 - New or Reactivated Member (use member application checklist)
 - Active MLS member
 - Member type is DR
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ADD TO REPORTS:

- Do NRDS Transfer
- Add to Membership Report
- Do Office Folder (if office is reactivating, combine old file with new)