



UNLICENSED ASSISTANT/USER INFORMATION

FIRM INFORMATION:

Firm Name: _____ NAR#: _____

Firm Address: _____
Street/P.O Box/Apt. City State Zip

Firm Phone: _____ Fax#: _____

E-Mail: _____ Web: _____

ASSISTANT/USER INFORMATION

(check one)

Personal Assistant (access to only one agent's listings)

Office Assistant (access to all listings owned by this office)

Company Assistant (access to all listings owned by this office and any branch offices)

ACTION TO BE TAKEN

New Assistant Reinstate Transfer Remove

Assistant Name: _____

Agent or office assistant is assigned to: _____

Office Phone: _____ Fax: _____

Home Address: _____
Street/P.O Box/Apt. City State Zip
(Required to verify against DBPR records)

E-Mail: _____ Password: _____
(6-12 characters Maximum)

SIGNATURES

Broker Signature _____ Date ____/____/____

Assistant Signature _____ Date ____/____/____

Please return to LAR with a copy of assistant's driver's license, \$65.00 set up fee plus pro-rated annual fee. Assistant user fee of \$100.00 will be due annually September 15th.

Assistant Fee from _____ to _____ Amt \$ _____ + Set Up Fee \$ _____ =Total \$ _____

Credit Card # _____ Exp Date ____/____/____

Circle One: MasterCard Visa AMEX Discover Check# _____

Name on Credit Card _____

Signature of Card Holder _____