



# BROKERAGE MEMBERSHIP APPLICATION FORM

## Instructions

Please fill out the form to completion with the information that corresponds exactly as it appears on the registration issued by Real Estate Council of Ontario (RECO) as proclaimed by the Real Estate and Business Brokers Act (Ontario) (the "Act").

Attach the following documents and submit to [membership@mreb.ca](mailto:membership@mreb.ca) once complete.

- i. Completed Broker of Record or Broker Manager MREB Membership Application
- ii. Copy of articles of incorporation or Letters Patent of Incorporation
- iii. Copy of Brokerages RECO Registration
- iv. Copy of Broker of Record RECO Registration

## Brokerage Information

Brokerage Name			
Trade Name (as approved by RECO):			
Street Address (include Unit # if applicable):	City/Town:		
Postal Code:	Brokerage Website (if applicable):		
Phone Number:	Fax Number:		
Brokerage RECO Registration:	RECO Expiry Date: (YY/MM/DD)		
Brokerage Email:			

## Broker of Record Information

Broker of Record Name:			
Broker of Record RECO Number:	Expiry Date (YY/MM/DD):		
Others with Authority to Sign for Brokerage:	YES	NO	
Name of Additional Signing Authority Member (1):	Name of Additional Signing Authority Member (2):		

Has the Brokerage ever been a member with MREB previously? YES  NO

Does your brokerage require access to BrokerBay Inc? YES  NO

Signature

*Signature of the Person Submitting this Form*

Name

*Name of the Person Submitting this Form (print)*

Date of Signature



# BROKERAGE ADMIN APPLICATION FORM

**Please Note: Brokerage Administrators (must be unlicensed) fee is \$5.00 + HST per month annually (on a pro-rated basis) on time of joining. \$60.00 + HST per year.**

Brokerage administrators will be granted access to MREB.ca and are responsible to submit the required membership documents to active/transfer/terminate account access for agents. They will be your brokerage's contacts for MREB related services, notices, and news. Brokerage admin must be an unlicensed under RECO.

## Admin #1

Admin 1 Full Name:			
Phone Number:		Extension:	
Email:			

## Admin #2

Admin 2 Full Name:			
Phone Number:		Extension:	
Email:			

## Admin #3

Admin 3 Full Name:			
Phone Number:		Extension:	
Email:			

## Admin #4

Admin 3 Full Name:			
Phone Number:		Extension:	
Email:			



# CHARGES AND PAYMENT INFORMATION

**BROKERAGE JOINING FEE: \$1,500.00 plus HST**

**IMPORTANT NOTICE: FEES ARE NON-REFUNDABLE ONCE PAID TO MREB**

## Brokerage Information

Brokerage Name	
Member Name (Please print):	
Name on Credit Card:	
Amount:	\$
<b>MREB USE:</b>	<b>AUTHORIZATION NUMBER:</b>

Please provide a DIRECT contact number:	Phone #:
Card Type:	MASTERCARD:                      VISA:
Card Number:	
Expiry Date:	MM/YY

Signature  Name   
*Signature of the Person Submitting this Form*                      *Name of the Person Submitting this Form (print)*

Date of Signature   
*DD/MM/YY*

<b>MREB USE ONLY:</b>	
Brokerage Name:	_____
Brokerage MI #:	_____ CREA ID: _____
Date Processed:	_____ Staff Signature _____