Form 104 Membership Application Rev. 7/10 Page 1 of 2

## Northwest Multiple Listing Service MEMBERSHIP APPLICATION

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NORTHWEST MULTIPLE LISTING SERV (individual, partnership, company, or corpora			re owned by the entity
Firm Name:(As shown on license)			
(As snown on license)  Doing Business As:			
Street Address (Main/Corporate Office):			
City:	State:	Zip Code: _	
County	Is this a 🛚	residential or 🗖 o	commercial address?
Mailing Address:			
City:			
County:			
Firm Phone No.:	Fax No.:		<del> </del>
Office Email:	Website:		
Designated Broker:(Name as shown on license			
Email:			
Branch Offices in Washington State: (Atta	ach list if space is insufficie	ent)	
Address	County	Manager	Phone
This applicant firm is a:   Corporation;			
		•	
ist each corporate officer, partner or proprie	tor, and percentage of own	ersnip:	
Name		Title	Ownership Percentage
			, -
Residence Address			Phone
Name		Title	Ownership Percentage
Residence Address			Phone

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## Northwest Multiple Listing Service **MEMBERSHIP APPLICATION**

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Continued

Name	Title	Ownership Percentage	2
Residence Address		Phone	28
			29
Name	Title	Ownership Percentage	
Residence Address		Phone	30
			3
Name	Title	Ownership Percentage	
Residence Address		Phone	32
the applicant firm, or any of its owners, have scrow company, or other real estate related b		rage firm, mortgage and/or	3; 34
Name	City	Interest	3
Name	City	Interest	3
Name	City	Interest	3
check for \$500.00 is enclosed as Capital	Contribution, if application is approved.		3
ne undersigned designated broker hereby ag ylaws and Rules as presently in effect and a designated broker and/or change (no matte	s amended in the future, including notifyir		39 40 4
he undersigned owners (proprietors, stockhol wn 100% of applicant (including any percenta ehalf of applicant, agree to pay any and all du	age owned by the designated broker). All o	owners, individually and on	4: 4: 4:
Licensed Designated Broker (Please type or print)	Signature of Licensed Designated Broker	Date	4
			4
Owner (Please type or print)	Signature of Owner	Date	7
Owner (Please type or print)	Signature of Owner	Date	4
emili (Floade type of planty	eigriatal of ourier	Bute	4
Owner (Please type or print)	Signature of Owner	Date	7
Owner (Please type or print)	Signature of Owner	Date	4
Owner (Please type or print)	Signature of Owner	Date	5
			5
Owner (Please type or print)	Signature of Owner	Date	