



SPOKANE ASSOCIATION OF REALTORS®

ONLINE ACCESS & LISTING INPUT AUTHORIZATION
(FOR STAFF ONLY)

For: _____
[please print name of person to be granted access and input privileges if applicable]

Office Name: _____ Office#: _____

STAFF USERNAME: _____ (1st & middle initial + first 3 letters of your last name)
Upon creation of the account, the MLS will notify the staff member of their temporary password

The Participating Broker signing and initialing below grants authorization for the person named above to access the Spokane Association of REALTORS® Multiple Listing Service Online System and will be responsible for the monthly fees of the staff account, billed quarterly.

If Add/Change listings is initiated, the staff person will be required to attend the SAR Listing Input training class. On completion of class, the SAR will permit this person to perform the functions marked below.

BROKER: INITIAL EACH ITEM TO INDICATE PRIVILEGES TO BE ALLOWED
_____ Access to the Paragon MLS system only
_____ Add/Change office listings
_____ Add/Change all branch office listings

NOT TO DISCLOSE PASSWORD As per Sec. 10, of the Rules and Regulations of the Spokane Association of REALTORS® Multiple Listing Service, user agrees not to disclose password to any third party whomever (including, but not limited to assistants, another user, a person associated with another user or any other person associated with the user's office) and acknowledge that any disclosure will seriously jeopardize the security of the entire system and may cause irreparable injury to the SAR, its members and all other Users.

In the event of disclosure and/or use of the password by anyone other than the above named agent, a fine may be assessed as per Sec. 7, against the Participant. In addition, other disciplinary action may be taken against the Participant.

Information obtained from the SAR Online will be used exclusively by authorized members in compliance with Rules and Regulations of the Spokane Association of REALTORS®.

Staff Name: _____ [Signature] Date: _____

Staff Email: _____

Staff Phone: _____

Participating Broker: _____ [Signature]

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