

Bay Area Real Estate Information Services, Inc.
153 Stony Circle Suite 200
Santa Rosa, CA 95401
Office 707.575.8000
Fax: 707.577.0140
Email idx@norcalmls.com

Date: _____

Vendor Information

Name of Principle/Officer _____

Company Name _____

Company Address _____

City _____ State _____ Zip _____

Principal Phone () _____ Fax:() _____

Principal Email Address _____

Company Web Site Address _____

State of Incorporation/Organization _____

Are you a division or subsidiary of another company? Yes _____ No _____

If yes, what company? _____

Name of Product _____

Describe Product: _____

How would the data be used? _____

of BAREIS Member/Client(s): _____

Name: _____ Office Name: _____

**If more than one BAREIS Member/Client, please attach a list of the member/client's names and office names.*

Will the product be offered to any other agents? Yes _____ No _____

Will the data be available to any other site? Yes _____ No _____

Technical Contact Name: _____

Technical Contact Phone: _____ Fax: _____

Technical Contact Email: _____

Billing Contact Name: _____

Billing Contact Phone: _____ Fax: _____

Billing Contact Email: _____

Type of Access Required: (Please choose one) Ftp _____ RETS _____

URL to active sites you have done in the past? _____

****Please include the \$50 non-refundable processing fee with the vendor information sheet.****

Note: It takes a minimum of 4-8 weeks to process a vendor application for access. Vendor access is not generally granted for "development" purposes. Vendor access is granted only to firms with a valid business relationship with a BAREIS member.

Bay Area Real Estate Information Services, Inc. (BAREIS MLS®)

Vendor Processing Fee Form

Please send this completed form back with your Vendor Information Sheet

All fields must be completed in order for the credit card to be processed.

I, _____ authorize Bay Area Real Estate Information Services, Inc. (BAREIS MLS®)
Please print name of card holder.

to charge my: *Visa* *MasterCard* for the non-refundable \$50.00 vendor application processing fee.
We do not accept American Express or Discover

16 digit card number: _____ - _____ - _____ - _____ Exp: _____ / _____
Month Year

3-digit card code: _____ (The 3-digit code is the last 3 digits of the number found on the back of your card above, your signature)

Cardholder Signature: _____ Date: _____ / _____ / _____

Billing address for credit card: _____
Address City Zip

Vendor name payment is being made for: _____

****Please note:**

- A. This is a non-refundable vendor processing fee. In the event that your data feed request is denied, this processing fee will not be refunded.
- B. If the credit card is denied, on the 2nd attempt a \$25 failed credit card fee will be assessed.



Attn: Sabrina Timms
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