



**Bay Area Real Estate Information Services, Inc.**

153 Stony Circle, Suite 200 • Santa Rosa, CA 95401

Post Office Box 3367 • Santa Rosa, CA 95402

800.776.5252 • 707.575.8019 • Fax 707.577.0140

http://bareis.com

Cooperating Key Receipt Form

All Co-op key holders are bound by the existing Key Lease Agreement through their Primary Board which is a signatory to the Supra Key Reciprocal Agreement and to the Rules and Regulations (Regulations) of BAREIS MLS® who is issuing this Co-op code and granting access to the BAREIS MLS® lockbox system.

Keyholder Information – **All Fields** Must Be Completed. *Please Print Clearly.*

Agent Name: \_\_\_\_\_

Agent Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

DRE/DREA #: \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Agent Phone #: \_\_\_\_\_ Office Phone #: \_\_\_\_\_

Agent Email Address: \_\_\_\_\_

Office Name: \_\_\_\_\_

Office Address: \_\_\_\_\_

Cooperating Details

Primary Key Board: \_\_\_\_\_ Primary MLS: **Circle one:** MetroList® / East Bay / Sutter/Yuba  
MLSListings® / SFAR / Nevada County  
*What Association is key from?*

Key Serial#: \_\_\_\_\_ 4 Digit Pin Code: \_\_\_\_\_ Type of Key: **Circle one:** Display Key / ActiveKey  
XpressKey / eKey\*\*Must be an eKey to be eligible for remote co-oping

Cooperating fees are billed annually at a rate of **\$132.00** per year.

**\$20.00** programming fee to initiate service in-person at a BAREIS Service Center

**\$45.00** programming fee to initiate service remotely via email.

These fees are non-refundable.

*My signature below acknowledges I have been notified that BAREIS MLS® Regulations, which include key regulations, citations, and appeals processes, are posted on [BAREIS.com](http://BAREIS.com). As a condition of being granted the right to access the BAREIS MLS® lockbox system, I agree to comply with all BAREIS MLS® Regulations. I understand my Co-op key access may be terminated within the provisions of the Regulations of BAREIS MLS® for violation of the Regulations and/or for termination of my key privileges by my Primary Board.*

Keyholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

-----Staff Use Only-----

BAREIS ID/MMM #: \_\_\_\_\_ Prorated Amount Paid (including programming fee) \$ \_\_\_\_\_  
Cash: \_\_\_\_ Check#: \_\_\_\_\_ Credit Card: \_\_\_\_\_ (See attached form)

Service Center:

- |                              |                                   |                    |
|------------------------------|-----------------------------------|--------------------|
| _____ BAREIS Santa Rosa      | _____ BAREIS San Rafael           | _____ BAREIS Ukiah |
| _____ Solano Assoc., Vallejo | _____ N. Solano Assoc., Fairfield | _____ BAREIS Napa  |

Service Center Staff Initials: \_\_\_\_\_