



# COMPANY OFFICE UPDATE

• 321 E. Sixth St. Corona, CA 92879 • Ph: 951.735.5121 • Fax: 951.735.0335 • www.tigar.org

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

## Office Update

(Complete this section for updates to offices, including new or closed offices)

**New Office:**  **Closed Office:**  **Update:**  **Effective Date:** \_\_\_\_\_  
(\$100 OFFICE SET-UP FEE)

DR/Broker Name: \_\_\_\_\_ Firm Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Office Contact/Manager: \_\_\_\_\_  
(Office contact/manager must be a subscriber under the participating Designatd REALTOR®)

By signing below, I authorize \_\_\_\_\_ to sign any and all documents on my behalf, for The Inland Gateway Association of REALTORS® including, but not limited to, all MLS documents. Further understanding that according to the Association’s Bylaws, the Designated REALTOR® is defined as a principal of a firm, either as a sole proprietor, partner, corporate officer or branch office manager of a real estate firm. The National Association of REALTORS® has made it clear the the DR must be someone who has management control of the firm and is responsible to the local Association for firm activities. This includes, but not limited to, payment of dues, which can include application of the variable dues formula for those licensees in the firm who are not members of a particular local association, and responsibility for the firm in all arbitrations, mediations, and disciplinary hearings before the local association, including having the ability to bind said firm in all of the aforementioned.

**Designated REALTOR®/ Broker Name:** \_\_\_\_\_

**Designated REALTOR®/ Broker Signature:** \_\_\_\_\_

### (PLEASE SUBMIT \$100 NEW OFFICE SET-UP FEE)

Cash: \_\_\_\_\_ Check: \_\_\_\_\_ CC#: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

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

By signing below, I authorize the above amount to be charged to the credit card listed above. I also understand and agree to the Associations’s NO REFUND policy on all charges including Dues and MLS Fees. Credit card transactions will show REALTOR® Association/ML on your monthly statement.

**Signature of Cardholder:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(REQUIRED)