



Eastern Connecticut Association of REALTORS®
 106 Route 32, Suite 4, Franklin, CT 06254
APPLICATION FOR DESIGNATED REALTOR® MEMBERSHIP
 Phone: 860-892-2595 Fax: 860-892-2599



To the Eastern Connecticut Association of REALTORS®: I hereby apply for ___ primary ___ secondary Designated REALTOR® Membership in the above named Association and am enclosing payment in the amount of \$ _____ for my 20___ dues payable to Eastern Connecticut Association of REALTORS®. **(Total includes initiation fee, NAR/CTR/ECAR dues prorated according to month joining, voluntary PAF donation – see page 3 for breakdown).*

I hereby submit the following information for your consideration:

Name: _____ Date of Birth: _____

License #: _____

License type *(copy of license required with application)*: Broker Salesperson Appraiser

Office Name: _____

Office Address: _____

Office Phone: _____ Fax: _____ Member's Business E-Mail: _____

Residence Address: _____

Additional Mailing Address: _____

Home Phone: _____ Fax: _____ Personal E-Mail: _____

Cell Phone: _____ Web Site Address: http://_____

By providing and/or updating my contact information, I consent that the REALTOR® Associations (local, state, national) and their subsidiaries, if any (e.g., MLS, Foundation) may contact me at the specified address, telephone numbers, fax numbers, email address or other means of communication available including my cell phone number via text messages, SMS messages, and calls to my cell phone using pre-recorded electronic message calls, as well as calls made via automatic telephone dialing systems or via email. I further agree to update the association with any changes to my contact information and to permit the association to update contact information provided by any multiple listing service as part and continuation of this consent. I understand that I can revoke this consent at any time by replying STOP to cancel. Message and Data Rates May Apply.

Preferred Mailing: Home Office Addl. Address Preferred Phone: Home Office Cell
 Preferred Fax: Home Office *Preferred Email: Business Personal

ECAR Web Site Logon Information: Your user name will be your *preferred email address provided above. Passwords must be at least six characters consisting of letters and/or numbers and are case sensitive. I request the following password to access the web site: _____.

Membership in the Eastern CT Association of REALTORS® (ECAR) necessarily means that I am also a member of the Connecticut Association of REALTORS® (CTR) and National Association of REALTORS® (NAR). Membership brings certain privileges and obligations that require compliance. In the event of my election, I understand that I will be required to complete periodic Code of Ethics training as specified in the association's bylaws as a continued condition of membership and I agree to be bound by the Code of Ethics of the National Association, which includes the duty to arbitrate (or to mediate if required by the association), as well as the Constitution, Bylaws and Rules and Regulations of ECAR, CTR, and NAR.

FOR ASSOCIATION USE ONLY

___ License ___ Exam	___ RAMCO / NRDS # _____
___ DCP verification	___ Dues Recorded
___ DR signature	___ Welcome Email
___ Notice to DRs	___ Orientation Email ___ Ethics ___ Attended Orientation
___ Dues Waiver/Primary Assoc.	___ _____
___ _____	___ _____

I understand the maximum fine for violations of the Code of Ethics and violations of other membership duties is stated in the Bylaws. Membership is final only upon approval by the Board of Directors and may be revoked should completion of requirements, such as orientation, not be completed within timeframe established in the association's bylaws.

NOTE: Applicant acknowledges that if accepted as a member and he/she subsequently resigns from the Board or otherwise causes membership to terminate with an ethics complaint pending, the Board of Directors may condition renewal of membership upon applicant's certification that he/she will submit to the pending ethics proceeding and will abide by the decision of the hearing panel. If applicant resigns or otherwise causes membership to terminate, the duty to submit to arbitration continues in effect even after membership lapses or is terminated, provided the dispute arose while applicant was a REALTOR®.

1. Are you presently a member of any other Association of REALTORS®? _____
If yes, name of Association and type of membership held: _____
2. Have you previously held membership in any other Association of REALTORS®? _____
If yes, name of Association and type of membership held: _____
3. Have you been found in violation of the Code of Ethics or other membership duties in any Association of REALTORS® _____ in the past three (3) years or are there any such complaints pending? _____ (If yes, provide details as an attachment.)
4. If you are now or have ever been a REALTOR®, indicate your NAR membership (NRDS) #: _____
and last date (year) of completion of NAR's Code of Ethics training requirement: _____
5. Company information: ___Sole Proprietor ___Partnership ___Corporation ___LLC (Limited Liability Company)
6. Your position: ___Principal ___Partner ___Corporate Officer ___Branch Office Manager
7. Names and positions of other Partners/Officers of your firm: _____

8. Have you ever been refused membership in any other Association of REALTORS®? _____
If yes, state the basis for each such refusal and detail the circumstances related thereto: _____

9. Is the Office Address, as stated, your principal place of business? _____
If not, please provide address: _____
10. Please provide the address of any branch offices, if any: _____

11. Do you hold, or have you ever held, a real estate license in any other state? _____
If so, where: _____ License #: _____
12. Have you or your firm been found in violation of state real estate licensing regulations within the last three years? If yes, provide details: _____
13. Have you or your firm been convicted, adjudged, or otherwise recorded as guilty by a final judgment of any court of competent jurisdiction of a felony or other crime. ___Yes ___No
If yes, provide details: _____
14. Real Estate Specialty: Residential Commercial Resort International Other: _____

I hereby certify that the foregoing information furnished by me is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership if granted. I further agree that, if accepted for membership in the Board, I shall pay the fees and dues as from time to time established. **NOTE:** Payments to the Eastern Connecticut Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense. Dues are non-refundable.

In the event of non-election, my local dues only shall be returned to me less a prorated amount to cover the number of days that I received association services and any application fee. I understand that annual dues are non-refundable.

(Optional Information): Number of years engaged in the real estate business: _____
How long with current real estate firm? _____ Previous real estate firm (if applicable): _____

Designated REALTOR®'s Signature: _____ Date: _____

EASTERN CONNECTICUT ASSOCIATION OF REALTORS, INC.
2020 Dues and Fees Payment Schedule
Effective 1/1/2020

	DR Initiation Fee	NAR Dues	CTR Dues	ECAR Dues	Voluntary PAF Donation²	Total Due
January	300.00	185.00	265.00	400.00	15.00	1,165.00
February	300.00	172.50	242.92	366.67	15.00	1,097.09
March	300.00	160.00	220.83	333.33	15.00	1,029.16
April	300.00	147.50	198.75	300.00	15.00	961.25
May	300.00	135.00	176.67	266.67	15.00	893.34
June	300.00	122.50	154.58	233.33	15.00	825.41
July	300.00	110.00	132.50	200.00	15.00	757.50
August	300.00	97.50	110.42	166.67	15.00	689.59
September	300.00	85.00	88.33	133.33	15.00	621.66
October	300.00	72.50	66.25	100.00	15.00	553.75
November	300.00	60.00	44.17	66.67	15.00	485.84
December ¹	300.00	47.50	22.08	33.33	15.00	417.91
¹ December applicants must also pay 2021 dues						
² The Voluntary Political Advocacy Fund contribution is not tax deductible						

The IRS requires reporting of the nondeductible portion of dues on invoices. Membership dues are not deductible as charitable contributions but may be deductible as an ordinary and necessary business expense, subject to restrictions imposed as a result of association lobbying activities. For 2020 NAR dues/assessment of \$185 per member, NAR computes 38% of the dues portion of \$150 or \$57 to be nondeductible for the member's income tax due to NAR's lobbying efforts. The Consumer Advertising Campaign assessment of \$35 is fully deductible. For 2020 CTR dues of \$265 per member, CTR computes 58% of \$265 (\$155) or 33% of \$165 (\$55) to be nondeductible for the member's income tax due to CTR's lobbying efforts. The amount of CTR's affiliate member dues which is non-deductible is 29% of \$155 (\$45). The Voluntary Political Advocacy Fund contribution is not deductible. The Voluntary Gates Scholarship Fund contribution is deductible to the extent allowed by law. For 2020 ECAR REALTOR dues of \$400 per member, ECAR computes 1% or \$4 to be nondeductible for the member's income tax due to ECAR's lobbying efforts. For 2020 ECAR Affiliate dues of \$225 per member, ECAR computes 1% or \$2 to be nondeductible for the member's income tax due to ECAR's lobbying efforts. For 2020 ECAR Associate Affiliate dues of \$95 per member, ECAR computes 1% or \$1 to be nondeductible for the member's income tax due to ECAR's lobbying efforts.

Payment Type (please indicate):	
<input type="checkbox"/> Check for \$ _____ payable to ECAR Check #: _____ Name on Check: _____	
<input type="checkbox"/> Credit Card: Type of Card*: <input type="checkbox"/> Mastercard <input type="checkbox"/> Visa <input type="checkbox"/> Discover	
Credit Card Number*: _____ 3 digit Code*: _____ Expiration Date*: _____	
Name on Credit Card*: _____	
Credit Card Billing Address*: _____ Zip Code*: _____	
Payment Amount (\$) _____	
Signature* _____	Date _____
* required	