

**Idaho Association of REALTORS®, Inc**

**10116 W Overland Rd**

**Boise, ID 83709**

**208 342-3585 Fax: 208 336-7958**

**Super User Authorization for Non-Licensee to Access Idaho Association of REALTORS® Online Forms**

I , \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_dba as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am hereby notifying

 *Print Designated Broker Member Name Print Office Name*

Idaho Association of REALTORS® (IAR) that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ functions with my office as:

 *Print Assistant Name*

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| A non-licensed assistant for Designated Broker member  |
| This assistant’s duties require access to IR’s online forms for the following purposes:  |
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I request that this assistant be given access codes to IR online forms for the purposes described above. I agree that this assistant will access the forms using only his/her personal access codes, as provided by IR, and will use IR forms only for the exclusive benefit of myself. Assistant understands that this access is not to be used for personal reasons, or for the benefit of any other person or entity. I understand that I will be held responsible for the assistant’s actions in the same manner that I am responsible for actions performed by agents licensed with me.

I agree that this assistant will abide by all obligations imposed upon licensees, which includes but is not limited to all relevant Bylaws, Rules and Regulations as from time to time amended, and the National Association Code of Ethics, and that this assistant will observe any other obligations imposed upon subscribers/users of Idaho REALTORS® online forms. IR reserves the right to terminate the assistant’s access code, at IR’s sole discretion, for any reason, for any misuse of IR online forms or any failure to abide by any obligation imposed by this Agreement.

I further agree to indemnify and hold harmless Idaho REALTORS® from any and all claims and/or liability for damages arising from any action of this assistant while using the online forms, and to notify IR immediately when the assistant’s affiliation with my office is terminated.

I acknowledge that by giving this assistant access codes to IR online forms this assistant will have access to all contracts and transaction information for every transaction being handled by my brokerage. It will be possible for this assistant to access transaction in which this assistant is not helping me. It is my responsibility to monitor this assistant’s use and access to IR online forms to ensure compliance with this Agreement.

There is an **annual fee of $100 per assistant** (non-refundable) paid to Idaho REALTORS®.

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| *Assistant Information* |  |  |
| *Name*: |  | Signature of Designated Broker Member |
| *MLS#:* |  |  |
| *Email:* |  | Name of Office |
| *Name of person they are assisting:* |  |  |
| *NRDS# of person they are assisting:* |  | Date |