

## Subscription Waiver

The Participant of the service shall be exempt from payment of Connecticut Multiple Listing Service, Inc. Subscriber fees for the individual identified below who does not have access to and will not make use of the MLS service.

Such exemption shall be effective for a period of 6 months only or through the end of the current CTMLS billing cycle (*CTMLS billing cycle runs May-October and November-April*) which ever comes first and effective upon approval by the CTMLS, Inc. The exemption for any individual shall automatically be revoked upon the individual's utilization of the MLS service in any manner.

***Certification of Individual Affiliated with Participant in a Multiple Listing Service:***

I, \_\_\_\_\_ associated with \_\_\_\_\_  
*Name of Individual (Agent) Name of Participant (Broker)*

Pledge to not use the Multiple Listing Service in any way at any time, and understand that such usage will obligate, the Participant with whom I am affiliated to pay a subscription fee for all months claimed under this waiver and may make them liable for a fine of up to \$5000 per occurrence for unauthorized use of MLS.

\_\_\_\_\_  
*Signature of Individual (Agent)*

\_\_\_\_\_  
*Name (type/print) of Individual*

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
*DATE:*

**Certification by Participant:**

I agree that I am responsible for controlling the access of \_\_\_\_\_  
*(Agent's Name)*

and \_\_\_\_\_ to the MLS system. I agree that use of the Multiple Listing Service in any way  
*(Effective Date)*

while under waiver constitutes an abuse of this waiver policy and a violation of the Rules and Regulations of the Connecticut Statewide MLS, Inc.

\_\_\_\_\_  
*Name (type/print) of MLS Participant (Broker)*

\_\_\_\_\_  
*Signature of MLS Participant*

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
*DATE:*

\*You must select one of the following that indicates your reason for waiving your service and proof of same:

- |  |  |
|--|--|
| <input type="checkbox"/> <b>Medical</b>  | <b><u>Primary Membership in another MLS</u></b> ( <i>Please chose one</i> ):   |
| <input type="checkbox"/> <b>Military</b> | <input type="checkbox"/> Greenwich Multiple Listing Service, Inc. <input type="checkbox"/> Darien Multiple Listing Service, Inc. |
|  | <input type="checkbox"/> New Canaan Multiple Listing Service, Inc. <input type="checkbox"/> Fairfield County MLS                 |
|  | <input type="checkbox"/> Other, please specify. _____  |