

**CLEVELAND CO. ASSOC/CHARLOTTE REGIONAL REALTOR®**  
**COOPERATING AGREEMENT**  
**Supra Key Reciprocal Information**

Please read this agreement carefully. Complete this form and return it to:  
Tere Blackwood, EO, Cleveland Co. Assoc. of REALTORS®, PO Box 2407, Shelby NC 28151. Phone:  
704-481-9335, or Fax: 704-749-2581

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

Firm Name: \_\_\_\_\_

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

City, State, Zip \_\_\_\_\_

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

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

-----MUST BE PROVIDED IN ORDER TO PLACE INTO SYSTEM-----

Display Key Serial# \_\_\_\_\_ ekey Serial# \_\_\_\_\_

Pin # \_\_\_\_\_

**\*\*\*There is a one time \$50.00 activation fee for non-members of Cleveland Co. MLS (\$10.00 fee for members). All fees MUST be paid by check, cash, money order or credit card BEFORE service will be activated. If paying by CREDIT CARD (VISA and MC only) please provide the following: CC# \_\_\_\_\_ Exp date: mo \_\_\_/yr \_\_\_ 3 digit code \_\_\_\_\_**

Name on Card: \_\_\_\_\_

*Please read the following information carefully; you are signing an affidavit.*

In return for the privilege of having my Supra electronic lockbox key active in the areas covered by both the Cleveland Co. Association of REALTORS® and the Charlotte Regional REALTOR® Association, I will abide by these rules regarding key use:

1. I will call the listing agent for the property before making an appointment to show the home.
2. I will have a conversation with the Listing Agent regarding the split of any commission, subject to the laws of my state of license regarding appropriate disclosure of commission information.
3. I will always leave a business card at the property I have shown.
4. I will disclose my agency representation and educate the buyer regarding agency.
5. I understand that if I am found to be in violation of the terms of this Agreement that I will lose my guest privileges in the cooperating county's Supra system and that access to my Supra key will be turned off in the cooperating county's system.
6. In the event of a dispute, which results in the filing of a grievance or arbitration, I agree to abide by the Bylaws of my primary key association.

I further acknowledge my awareness to show real estate in a state other than the one in which I am licensed is a violation of the law.

Name Printed: \_\_\_\_\_

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