

NEBBA-Plus Application for Membership

Name of Business: _____

Name(s) of Principal(s): _____

Address: _____

Telephone: _____ Cell Phone: _____

Website: _____ E-mail: _____

Organizations: Professional Designations. Membership(s) Business Brokerage Related

Are you a Member of IBBA ____ Do you have your CBI Designation? _____

Number of Brokers: _____ Associate Broker(s): _____

Broker of Record Real Estate License #(s) and State(s): _____

Or Salesperson Real Estate License #(s) and State(s) _____

Expiration Dates(s): _____

Brief Description of Business:

Specialties: _____

Years in Business: _____

Market Area Covered: _____

Number of Transactions the Office Closed in the Previous 12 Months: _____

Number of current listings: _____

You currently hold a Current Errors and Omissions Policy with an aggregate limit of (if YES, please include a copy with your application)

\$1M/\$500,000 each claim. Yes No

Have you ever Co-Brokered a business sale? Yes No

I have received a copy of and read the By-Laws of the NEBBA Plus CoBrokerage System. I hereby apply to join NEBBA-Plus, and if accepted, I agree to abide by the terms of the By-Laws, as amended.

Signature of Applicant: _____ Date: _____