WAIVER REQUEST

SUBSCRIBER: _____ SIGNATURE: _____
(Please print or type)
NEW WAIVER: ☐   RENEWAL OF PRE-EXISTING WAIVER: ☐
(Waiver valid for one year)
COMPANY: _____PHONE: _____

PARTICIPANT: _____ SIGNATURE: _____
(Please print or type)
 (a) As Participant and pursuant to the Rules and Regulations of the SWMLS Inc., I hereby request voluntary waiver status for the above-named Subscriber who is licensed under my Broker's license, for the following reason(s):
_____: Illness -- Long Term Duration
_____: Out of Area
_____: Exclusive Tract Sales Associate
_____: Associate engaged solely and exclusively in a specialty of the real estate business separate and apart from listing or selling the type of property which are required to be filed with the Service, such as Property Management, etc.
Please check the exception that applies.
_____ Property Management _____ Farm and Ranch _____ Commercial Real Estate (excluding residential income)
PLEASE PROVIDE A BRIEF EXPLANATION:
_____
_____
_____
As the Subscriber, I certify that I will not list or sell the types of properties which are required to be filed with the Service during the period of this waiver.

(a) Participants of SWMLS are not eligible to receive waivers from the Service. This waiver is not transferable if the Subscriber transfers his/her license to another Participant.

(b) By applying for this waiver, the Qualifying Broker (Participant) is certifying that the above Subscriber will not list or sell the types of properties requires to be filed with SWMLS. The Participant agrees to notify SWMLS immediately should the above named Subscriber begin listing or selling the types of properties required to be filed with SWMLS.

(c) This waiver is for a period of **one year** from the date of approval by the Executive Vice President. If at any time during this waiver period the Subscriber uses any of the SWMLS services, this waiver will be cancelled.