



**SOUTHLAND REGIONAL
ASSOCIATION OF REALTORS®, INC.**

RECIPROCAL KEY ACCESS REQUEST FORM

****NOTE:** Your primary Association **must code your Supra key with CD59 & this form must be completed before calling our KIM System** for an update code or your key will not work in our area.

DATE: _____

MEMBER NAME: _____

OFFICE NAME: _____

OFFICE ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

OFFICE PHONE #: _____ OFFICE FAX #: _____

DESIGNATED BROKER: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE #: _____

NAR-ID # or Member # from your Board: _____

KEY SERIAL / CARD #: _____ (must provide)

PIN CODE #: _____ (must provide)

BOARD AUTHORIZATION: Letter in Good Standing from your Board.

KEY TYPE: Display or E-Key **\$35 Programming Fee**

SUPRA SYSTEM KIM INFORMATION: To Access KIM voice: 1-877-788-4220 (update code)

SRAR ASSOCIATION USE ONLY

RECIPROCAL MEMBERSHIP #: _____ FIRM #: _____

DATE ADDED: _____ SIGNATURE: _____

CHECK #: _____ ABA #: _____ CASH: _____ VISA: _____

KEY MAINTENANCE: \$ _____ TOTAL: \$ _____

MEMBERSHIP FAX: (818) 786-0364