GREATER NORTHWOODS MULTIPLE LISTING SERVICE, INC. INSPECTOR REGISTRATION FORM

Mandatory fields are preceded by *

MLS Field	MLS User Information
* Last Name:	
* First Name:	- INSPECTOR
* License Number:	
* Email Address:	
* Cell Phone:	
* Office Name:	
Office Address 1:	
Office Address 2:	
* Office City, State:	
Zip Code:	
the ShowingTime schedu properties. I am applying for access ID and Passwords that a I acknowledge the duty to inspector or association	a licensed inspector in the state of Wisconsin and am responsible for my actions regarding the use of ling app, which I may download and access for the purpose of scheduling access to GNMLS listed to the ShowingTime app to facilitate scheduling inspections as requested by REALTORS®. Inspector re assigned to me are unique and confidential. I agree that I will not disclose them to any person. To promptly (within 3 days) notify GNMLS of any change in my status as a Wisconsin licensed with the above-named company or of any criminal convictions that may impact my status. I see the scheduling app in accordance with my current and valid license making me eligible to perform
	ubscriber permission to use ShowingTime software in conjunction with ShowingTime-MLS, which to and subject to the terms of GNMLS Policies. All other uses are prohibited
Inspector Signature:	Date:
Supervisor Signature: (if not a sole proprietor	Date:
(if not a sole proprietor	Last Pavisade

Last Revised: 03/20

Please send all information to:

GNMLS, PO Box 377, Woodruff WI 54568 Fax: (888) 399-2118

Email: staff@northwoodsrealtors.org