

Checklist: *MLS Listing*

Property Address _____

Has the listing already been loaded?

☐ No (Office to load) ☐ Yes (MLS number _____)

Will it need to be loaded on another board?

☐ No ☐ Yes (Office to load) ☐ Already Loaded (MLS number _____)

PROPERTY FOR SALE

☐ Current Data Sheet filled out, signed & dated where applicable

☐ Current Listing Agreement filled out, signed & dated where applicable

☐ Current Working With a Realtor filled out, signed & dated where applicable

☐ Mortgage Verification form completed

☐ Current Fintrac completed

☐ Verification of Property Facts completed

☐ Appointment Instructions completed

☐ Explain showing process to Sellers *(for example, what to expect when the Office calls for an appointment)*

☐ Photos and/or additional listing attachments provided to MLS Department *(registrant's disclosure, floor plan, survey, etc.)*

☐ Power of Attorney documents *(if applicable)*

☐ Seller's Direction re: Property/Offers completed, signed & dated where applicable

☐ Entry/Access to Property Tenant Acknowledgement completed *(if applicable)*

☐ Speak to Design Department re: any marketing material required

☐ Privacy Act completed

☐ Authorization form completed

☐ Exception to Listing Agreement completed *(if applicable)*

☐ Multiple Offer Procedure Agreement completed

PROPERTY FOR LEASE

☐ Current Data Sheet filled out, signed & dated where applicable

☐ Current Listing Agreement filled out, signed & dated where applicable

☐ Current Working With a Realtor filled out, signed & dated where applicable

☐ Appointment Instructions completed

☐ Explain showing process to Sellers / Tenants *(for example, what to expect when the Office calls for an appointment)*

☐ Photos and/or additional listing attachments provided to MLS Department *(registrant's disclosure, floor plan, survey, etc.)*

☐ Power of Attorney documents *(if applicable)*

☐ Seller's Direction re: Property/Offers completed, signed & dated where applicable

☐ Entry/Access to Property Tenant Acknowledgement completed *(if applicable)*

☐ Speak to Design Department re: any marketing material required

☐ Privacy Act completed

☐ Authorization form completed

APPOINTMENT INSTRUCTIONS

MLS # _____

Property _____

Agent _____

Appointment Instructions

Min Notice Required: _____ (hours)

Max Appt Duration: ☐ 1 hr ☐ 1/2 hr ☐ 15 mins

Allow Double Bookings: ☐ YES ☐ NO

Admin / Front Desk Instructions (select one box)

CONTACT SELLERS / LISTING CONTACTS:

- ☐ Call listing contact(s) & wait for confirmation
- ☐ Email / Text listing contact(s) & wait for confirmation
- ☐ Leave voicemail & immediately confirm

AUTO- CONFIRM APPOINTMENTS

- ☐ Property is vacant, always confirm
- ☐ Auto Message listing contact(s) and confirm

LISTING AGENT TO CONFIRM

- ☐ Call listing agent for confirmation instructions
- ☐ Page listing agent for confirmation instructions
- ☐ Do not contact listing agent. They will confirm direct.

Page Me Regarding

- ☐ New Appt ☐ Denied ☐ Cancelled
- ☐ Confirmed ☐ Time Change ☐ Reminders

Special Instructions / Time & Day Restrictions

Are there any restricted times / days / special instructions?

Access Instructions:

- ☐ Lockbox
- ☐ Door Code
- ☐ Go Direct
- ☐ Key
- ☐ SentriLock

 **CODE**

Where is the LBX located? / Any other access instructions?

Is there an Alarm? ☐ YES ☐ NO

 **ALARM CODE**

Showing Agent Instructions:

Other info for Showing Agent:

- ☐ Turn Off Lights
- ☐ Remove Shoes
- ☐ Leave Card
- ☐ Lock Doors
- ☐ Call if late
- ☐ Knock First
- ☐ Bring RECO Lic.

Listing Contacts

Name: _____

Phone: (_____) _____ - _____

Email: _____

Notify By:

- ☐ Email
- ☐ Text Msg
- ☐ **Must Call**

Appointment Permissions:

- ☐ Can **Confirm**
- ☐ Can **Deny**

Send The following notifications:

- ☐ New Appt ☐ Denied ☐ Cancelled
- ☐ Confirmed ☐ Time Change ☐ Reminders

Name: _____

Phone: (_____) _____ - _____

Email: _____

Notify By:

- ☐ Email
- ☐ Text Msg
- ☐ **Must Call**

Appointment Permissions:

- ☐ Can **Confirm**
- ☐ Can **Deny**

Send The following notifications:

- ☐ New Appt ☐ Denied ☐ Cancelled
- ☐ Confirmed ☐ Time Change ☐ Reminders

OFFER INSTRUCTIONS

Property _____

Agent _____

When are offers begin accepted? (select one box)

☐ Offers Accepted Anytime

☐ Holding Offer Date

Date: _____ Time: _____

Are you accepting pre-emptive offers: ☐ YES ☐ NO

Other Instructions (select one box)

Are you requesting a minimum irrevocable? ☐ YES ☐ NO

If yes, how long: _____ (hours)

Other details showing agents should know? (explain below)

Offer Submission Method

☐ In Person

At Location: _____

☐ By E-mail

To Email: _____

☐ Fax

To Fax #: _____

☐ Other Method (explain)

Automated Offer Notification - Preferences

When an offer is registered,
Automatically Notify:
(select one)

- ☐ ALL AGENTS WHO'VE SEEN THE PROPERTY (default)
- ☐ ONLY AGENTS WITH REGISTERED OFFERS
- ☐ DO NOT NOTIFY ANYONE

Is there any additional information you would like to include in the automated notification that goes to the showing agents when an offer is registered?

Individual Identification Information Record

NOTE: An Individual Identification Information Record is required by the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act*. This Record must be completed by the REALTOR® member whenever they act in respect to the purchase or sale of real estate.

It is recommended that the Individual Identification Information Record be completed:

- (i) for a buyer when the offer is submitted and/or a deposit made, and
- (ii) for a seller when the seller accepts the offer.

Transaction Property Address:

Sales Representative/Broker Name:

Date Information Verified/Credit File Consulted:

A. Verification of Individual

NOTE: One of Section A.1, A.2. or A.3 must be completed for your individual clients or unrepresented individuals that are not clients, but are parties to the transaction (e.g. unrepresented buyer or seller). Where you are unable to identify an unrepresented individual, complete section A.4 and consider sending a Suspicious Transaction Report to FINTRAC if there are reasonable grounds to suspect that the transaction involves the proceeds of crime or terrorist activity. Where you are using an agent or mandatary to verify the identity of an individual, see procedure described in CREA's materials on REALTOR Link®.

1. Full legal name of individual:

2. Address:

3. Date of Birth:

4. Nature of Principal Business or Occupation:

A.1 Federal/Provincial/Territorial Government-Issued Photo ID

Ascertain the individual's identity by comparing the individual to their photo ID. The individual must be physically present unless using technology capable of assessing a government-issued photo identification document's authenticity.

1. Type of Identification Document*: (must view the original and have a photo, see CREA's FINTRAC materials on REALTOR Link® for examples)

2. Document Identifier Number:

3. Issuing Jurisdiction: Country:

4. Document Expiry Date: (insert applicable Province, Territory, Foreign Jurisdiction or "Canada")
(must be valid and not expired)

A.2 Credit File Method

Ascertain the individual's identity by comparing the individual's name, date of birth and address information above to information in a Canadian credit file that has been in existence for at least three years and is derived from more than one source. If any of the information does not match, you will need to use another method to ascertain client identity. Consult the credit file at the time you ascertain the individual's identity. The individual does not need to be physically present.

1. Name of Canadian Credit Bureau Holding the Credit File:

2. Reference Number of Credit File:

A.3 Dual ID Process Method

1. Complete two of the following three checkboxes by ascertaining the individual's identity by referring to information in **two** independent, reliable, sources. Each source must be well known and reputable (e.g., federal, provincial, territorial and municipal levels of government, crown corporations, financial entities or utility providers). The individual does not need to be physically present.

☐ Confirm the individual's name and date of birth by referring to a document or source containing the individual's name and date of birth*

☐ Name of Source:

☐ Account Number**: (must be valid and not expired; must be recent if no expiry date)

☐ Confirm the individual's name and address by referring to a document or source containing the individual's name and address*

☐ Name of Source:

☐ Account Number**: (must be valid and not expired; must be recent if no expiry date)

☐ Confirm the individuals' name and confirm a financial account*

☐ Name of Source:

☐ Financial Account Type:

☐ Account Number**:

*See CREA's FINTRAC materials on REALTOR Link® for examples. ** Or reference number if there is no account number.

Individual Identification Information Record

A.4 Unrepresented Individual Reasonable Measures Record (if applicable)

Only complete this section when you are unable to ascertain the identity of an unrepresented individual.

1. Measures taken to Ascertain Identity (check one):

- ☐ Asked unrepresented individual for information to ascertain their identity
- ☐ Other, explain:

Date on which above measures taken:

2. Reasons why measures were unsuccessful (check one):

- ☐ Unrepresented individual did not provide information
- ☐ Other, explain:

B. Verification of Third Parties

NOTE: Only complete Section B for your clients. Take reasonable measures to determine whether your clients are acting on behalf of third parties by completing this section of the form. If you are not able to determine whether your clients are acting on behalf of a third party but there are reasonable grounds to suspect there are, complete Section B.1. If there is a third party, complete Section B.2.

B.1 Third Party Reasonable Measures

Is the transaction being conducted on behalf of a third party according to the client? (check one):

- ☐ Yes
- ☐ No

Describe why you think your client may be acting on behalf a third party:

.....

B.2 Third Party Record

Where there is a third party, complete this section.

- 1. Name of other entity:**
- 2. Address:**
- 3. Telephone number:**
- 4. Date of Birth (if applicable):**
- 5. Nature of Principal Business or Occupation:**
- 6. Registration or incorporation number, and jurisdiction and country that issued that number (if applicable):**
- 7. Relationship between third party and client:**

Individual Identification Information Record

NOTE: Only complete Sections C and D for your clients.

C. Client Risk *(ask your Compliance Officer if this section is applicable)*

Determine the level of risk of a money laundering or terrorist financing offence for this client by determining the appropriate cluster of client in your policies and procedures manual this client falls into and checking one of the checkboxes below:

Low Risk

- ☐ Canadian Citizen or Resident Physically Present
- ☐ Canadian Citizen or Resident Not Physically Present
- ☐ Canadian Citizen or Resident – High Crime Area – No Other Higher Risk Factors Evident
- ☐ Foreign Citizen or Resident that does not Operate in a High Risk Country (physically present or not)
- ☐ Other, explain:

Medium Risk

- ☐ Explain:

High Risk

- ☐ Foreign Citizen or Resident that operates in a High Risk Country (physically present or not)
- ☐ Other, explain:

If you determined that the client's risk was high, tell your brokerage's Compliance Officer. They will want to consider this when conducting the overall brokerage risk assessment, which occurs every two years. It will also be relevant in completing Section D below. Note that your brokerage may have developed other clusters not listed above. If no cluster is appropriate, the agent will need to provide a risk assessment of the client, and explain their assessment, in the relevant space above.

Individual Identification Information Record

D. Business Relationship

D.1. Purpose and Intended Nature of the Business Relationship

Check the appropriate boxes.

Acting as an agent for the purchase or sale of:

- ☐ Residential property
- ☐ Residential property for income purposes
- ☐ Commercial property
- ☐ Land for Commercial Use
- ☐ Other, please specify:

Optional: describe your business dealings with the client and include information that would help you anticipate the types of transactions and activities that the client may conduct.

.....

.....

D.2. Measures Taken to Monitor Business Relationship and Keep Client Information Up-To-Date

- D.2.1. Ask the client if their name, address or principal business or occupation has changed and if it has include the updated information on page one.
- D.2.2 Keep all relevant correspondence with the client on file in order to maintain a record of the information you have used to monitor the business relationship with the client. Optional - if you have taken measures beyond simply keeping correspondence on file, specify them here:

D.2.3. If the client is high risk you must conduct enhanced measures to monitor the brokerage's business relationship and keep their client information up to date. Optional - consult your Compliance Officer and document what enhanced measures you have applied:

D.3 Suspicious Transactions

Don't forget, if you see something suspicious during the transaction report it to your Compliance Officer. Consult your policies and procedures manual for more information.

E. Terrorist Property Reports

Don't forget to follow your brokerage's procedures with respect to terrorist property reports. Consult your policies and procedures manual for more information.

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NOTE: One of Section A.1, A.2. or A.3 must be completed for your individual clients or unrepresented individuals that are not clients, but are parties to the transaction (e.g. unrepresented buyer or seller). Where you are unable to identify an unrepresented individual, complete section A.4 and consider sending a Suspicious Transaction Report to FINTRAC if there are reasonable grounds to suspect that the transaction involves the proceeds of crime or terrorist activity. Where you are using an agent or mandatary to verify the identity of an individual, see procedure described in CREA's materials on REALTOR Link®.

1. Full legal name of individual:

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(must be valid and not expired)

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1. Name of Canadian Credit Bureau Holding the Credit File:

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A.3 Dual ID Process Method

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☐ Confirm the individual's name and date of birth by referring to a document or source containing the individual's name and date of birth*

☐ Name of Source:

☐ Account Number**:
(must be valid and not expired; must be recent if no expiry date)

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☐ Name of Source:

☐ Account Number**:
(must be valid and not expired; must be recent if no expiry date)

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- ☐ Other, explain:

Medium Risk

- ☐ Explain:

High Risk

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If you determined that the client's risk was high, tell your brokerage's Compliance Officer. They will want to consider this when conducting the overall brokerage risk assessment, which occurs every two years. It will also be relevant in completing Section D below. Note that your brokerage may have developed other clusters not listed above. If no cluster is appropriate, the agent will need to provide a risk assessment of the client, and explain their assessment, in the relevant space above.

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Don't forget, if you see something suspicious during the transaction report it to your Compliance Officer. Consult your policies and procedures manual for more information.

E. Terrorist Property Reports

Don't forget to follow your brokerage's procedures with respect to terrorist property reports. Consult your policies and procedures manual for more information.

Request Form: *Privacy Act*

Agreement

The Seller and the Buyer agree to allow the Listing Broker
(*Royal LePage Signature Realty*) to disclose the sale information for:

Address

Prior to the closing of said transaction.

*Both parties acknowledge that they have been advised that they can
accept or deny this disclosure.*

Signed

Witness

Seller

Date

Witness

Seller

Date

Witness

Buyer

Date

Witness

Buyer

Date

Form 244

for use in the Province of Ontario

RE: LISTING AGREEMENT FOR:

PROPERTY ADDRESS:

BETWEEN:

SELLER:

AND

LISTING BROKERAGE:

MLS® NUMBER(S): **L/BR ID. #**

INTERBOARD MLS® NUMBER: **BOARD:**

LISTING COMMENCEMENT DATE:

THE SELLER ACKNOWLEDGES THAT THIS DIRECTION CANNOT BE CHANGED OR AMENDED OTHER THAN BY A NEW WRITTEN DIRECTION.

The Seller hereby directs the following:

(Seller's Initials)

NO CONVEYANCE OF ANY WRITTEN SIGNED OFFERS prior to on the day of, 20.....
(a.m./p.m.)
(conveyance includes but is not limited to presentation, communication, transmission, entertainment or notification of)

(Seller's Initials)

OTHER DIRECTIONS

(Seller's Initials)

OTHER DIRECTIONS

The Seller acknowledges that the Listing Brokerage has professional obligations to other brokerages and the Listing Brokerage will be complying with rules and regulations with respect to showing of properties and the conveyance of written offers.

The Listing Brokerage agrees to immediately notify the Real Estate Board(s) of this Seller's Direction in accordance with the MLS® Rules and Regulations, provided that this is an MLS® listing.

The Seller and the Listing Brokerage agree that the said Listing Agreement shall remain in full force and effect.

THIS IS NOT A CANCELLATION OF THE LISTING AGREEMENT.

For the purposes of this Direction, "Seller" includes vendor, landlord and lessor, "Buyers" include purchaser, tenant and lessee and Real Estate Board(s) includes Real Estate Association(s).

SIGNED, SEALED AND DELIVERED I have hereunto set my hand and seal:

.....
(Seller)

(Seal)

.....
(Date)

.....
(Seller)

(Seal)

.....
(Date)

.....
(Name of Listing Brokerage)

.....
(Authorized to bind the Listing Brokerage)

.....
(Date)

.....
(Name of Person Signing)



Request Form: *Authorizations*

Agreement & Authorizations

Property Address & Postal code

I / We, _____,

(Seller/s of the above mentioned property) request that there be no

Offers until _____.

_____ I Hereby Direct Royal LePage Signature Realty to Use a
Initial Lockbox on my Property for Convenience of Showings

_____ I Hereby Permit Royal LePage Signature Realty to Host
Initial Open Houses on my Property

Signed

Seller

Date

Seller

Date

Sales Representative / Broker

Date

Exception to: *Listing Agreement*

Agreement

Property Address

I, _____, agree to reduce
the commission rate to _____% if I sell the above mentioned
property myself.

*Note: In the case of a Multiple Offer situation, commission paid by the
Seller shall revert back to the signed Multiple Listing Agreement.*

Signed

Seller

Date

Seller

Date

Sales Representative / Broker

Date



Signature Realty
IND. OWNED & OPERATED BROKERAGE

RESET

SUBMIT

Multiple Offer: *Procedure Agreement*

Listing Agreement For The Property Known As: _____

Property Address

Between: _____

Client Name(s)

AND: Royal LePage Signature Realty, Brokerage

It is our Brokerage's position that the seller and listing brokerage reject any buyer or buyer agent's offer to reduce the commission payable and deal with the confirmation of representation and commission payable as per the original listing agreement, thus negating any need for disclosure of the commission reduction.

All terms and conditions of the above-mentioned Listing Agreement remain in full force and effect.

I/We have read and clearly understand this Brokerage Multiple Offer Procedure Agreement and Direct the listing brokerage to implement this policy. I/We acknowledge this date having received a copy of same.

Seller

Date

Seller

Date

Sales Representative/Broker (*Authorized to Bind the Brokerage*)

Date



Signature Realty
IND. OWNED & OPERATED BROKERAGE

RESET

SUBMIT

adminwest@royallepagesignature.com

Entry/Access to Property Tenant Acknowledgement

The Seller/Landlord, Tenant(s) and Brokerage representatives acknowledges and understand there are rights and obligations under the relevant *Residential Tenancies Act* that must be adhered to and respected by the Seller/Landlord and their Tenant(s).

SELLER/LANDLORD:

TENANT:

PROPERTY:

BROKERAGE:

The Tenant(s) acknowledges and consents to the entry/access to the above property for the following purpose(s):

1.
(Home Inspection/Appraisal/Contractor Inspection/Showing etc.)

Details of Entry/Access:

2.
(Home Inspection/Appraisal/Contractor Inspection/Showing etc.)

Details of Entry/Access:

3.
(Home Inspection/Appraisal/Contractor Inspection/Showing etc.)

Details of Entry/Access:

The Tenant(s) acknowledges and understands that the listing brokerage representative, the co-operating brokerage representative and the parties identified immediately below, may be present during the entry/access to the property:

.....
.....

Tenant(s) acknowledges and consents to the taking of photographs/videos of the property as required for the purposes of the above described entry/access to the property.

Additional Comments:

.....
.....
.....

I acknowledge having received a copy of this Entry/Access to Property Tenant Acknowledgement.

..... (Signature of Tenant) (Date)

..... (Signature of Tenant) (Date)