



## Burbank Association of REALTORS® Reciprocal Key Access Request Form

DATE: \_\_\_\_\_

AGENT NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

OFFICE NAME: \_\_\_\_\_

OFFICE ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

OFFICE PHONE : \_\_\_\_\_ AGENT PHONE: \_\_\_\_\_

NRDS ID # or MEMBER ID # from your Board: \_\_\_\_\_

SUPRA KEY SERIAL NUMBER: \_\_\_\_\_ PIN#: \_\_\_\_\_

Active Key

E-Key

Display Key

MLS/BOARD/ASSOCIATION

MLS ONLY

ASSOCIATION NAME: \_\_\_\_\_

ASSOCIATION TELEPHONE #: \_\_\_\_\_

ASSOCIATION STAMP:

SUPRA SYSTEM KIM INFORMATION: TO ACCESS KIM VOICE CALL: (888) 968-4032

AGENT SIGNATURE: \_\_\_\_\_

ASSOCIATION STAFF SIGNATURE: \_\_\_\_\_

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### ASSOCIATION USE ONLY

**\*\* PLEASE ALLOW UP TO 24 HOURS FOR KEY PROGRAMMING \*\***

FAX TO: \_\_\_\_\_ DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

RECIPROCAL MEMBER ID #: \_\_\_\_\_ OFFICE ID #: \_\_\_\_\_