

Commercial Property Information Exchange (CPIX) Brokerage Enrollment Form

**CPIX.net**

5349 Old Franklin Road  
Grand Blanc, MI 48439  
Phone: 810.603.0676  
Fax: 810.603.0677  
Email: nmckellar@cbor.net



Enrollment Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Main Contact E-mail Address: \_\_\_\_\_

Standard Monthly Fees Per Selling/Leasing Agent:

|                                 |      |                           |
|---------------------------------|------|---------------------------|
| CBOR Primary Member:            | \$35 |                           |
| CBOR Secondary Member:          | \$40 | ***We will prepare a cost |
| Non-Realtor, Michigan Licensee: | \$75 | projection for you        |

Billing is Quarterly, due in Advance to the Upcoming Quarter

(January 1st, April 1st, July 1st, October 1st)

Fees are pro-rated. No Refunds on quarterly payments, adjustments possible.

Invoice \_\_\_\_\_

Set up Quarterly Automatic Credit Card Payments \_\_\_\_\_

(we will call for card info) Accepted: Visa, MasterCard, American Express, Discover

**All Selling/Leasing Agents Required to Join.** Administrative/Marketing Staff Free.

**Please provide a current list of Active Agents that will be joining.**

Signature \_\_\_\_\_

Date: \_\_\_\_\_

By signing above, I acknowledge and agree that the use of the CPIX website is subject to the EULA and CPIX Rules and Regulations, all of which are available at [www.cpix.net](http://www.cpix.net)