



POCONO MOUNTAINS Association of REALTORS®

2214 West Main Street, Stroudsburg, PA 18360

Phone 570-424-8846 Fax 570-424-9167

SUPRA RECIPROCITY REQUEST FORM

Member Name: _____ NRDS #: _____

Office Name: _____ Phone # _____

Office Address: _____ Fax # _____

City: _____ State: _____ Zip: _____

Agent email: _____ Cell Phone # _____

By signing this application, I agree to abide by the lockbox Rules and Regulations.

Member Signature: _____ Date: _____

Key Serial # _____	Pin Number: _____
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<u>Please check the area (s) in which you are requesting reciprocity for:</u>	
AUTO Lehigh Valley Assoc. of REALTORS® (1525) Phone: 610-882-4100/Fax 610-882-4144	<div style="text-align: right;">(1505)</div> AUTO Montgomery County Assoc. of REALTORS® Phone: 610-260-9931/Fax 610-260-9951
AUTO Pike Wayne Assoc. of REALTORS® (1547) Phone: 570-226-2300 /Fax 570-226-3189	<div style="text-align: right;">(1505)</div> AUTO Bucks County Assoc. of REALTORS® Phone: 215-956-9176/Fax 215-956-9298
AUTO Greater Scranton Assoc. of REALTORS® (1528) Phone 570-587-1757 / Fax 570-586-1898	<div style="text-align: right;">(1505)</div> AUTO Greater Philadelphia Assoc. of REALTORS® Phone 215-423-9381 / Fax 215-423-0406
_____ Luzerne County of REALTORS® (1531) Phone 570-283-2111 / Fax 570-288-7924	<div style="text-align: right;">(1505)</div> AUTO Suburban West REALTORS® Association Phone 610-560-4800 / Fax 610-560-4801

I hereby confirm that the aforementioned applicant is a member in good standing of the Pocono Mountains Association of REALTORS®.

PMAR Authorized Representative

Date