



**COMMUNITY DEVELOPMENT DISTRICT
REALTOR AUTHORIZATION FORM**

Homeowner: _____

Property Address: _____ **Contact Phone Number:** _____

Property Status: **For Sale** **For Rent**

Listing term FROM: _____ **TO:** _____ (MUST HAVE A DATE)
If no term is filled in this document will automatically expire on December 31st

Real Estate Agency: _____ **Agency Phone Number:** _____

Agent: _____ **Agent Contact Phone #:** _____

Agent: _____ **Agent Contact Phone #:** _____

Level of Authority Granted to Agent (CHECK ONE ONLY):

If more than one are checked or none is checked then NO call in Authority will be authorized.

- Authorized to call in Guests ONLY.** **Authorized to call in Services ONLY.**
 Authorized to call in Other Realtors ONLY **Authorized to call in Guests and Services.**
 Authorized to call in Guests, Services, and Realtors
 NO CALL IN AUTHORITY

Homeowner Signature: _____ **DATE:** _____

This form must be signed and dated by the homeowner to be valid.

Electronic Signatures will not be accepted
Return to any PMCDD Gatehouse or FAX 239-592-9021

This form supersedes all other forms prior to 05/2015