Coastal Association of REALTORS®
SentriLock Reciprocal Key Access Agreement

First Name	MI	Last Name	
Company	Phone#	Fax#	
Office Address	City	State	Zip Code
Home Address	City	State	Zip Code
Home Phone#		E-Mail Address	

Please read and be familiar with the entire Lockbox and Keycard Rules and Regulations, Coastal Association of REALTORS®, Inc., located on www.coastalrealtor.org.

Comply with National Association of REALTORS® requirements (as from time to time amended) for the access and use of a Key Box System, including notification of each listing office or listing agent of the SentriCard Holder's intention to enter the property through the use of the Key Box. This notification is to be prior to the actual entry unless the listing indicates the cooperating agent may access the property without prior notice to the listing agent or the listing office.

By the signatures below, both the agent and Designated REALTOR®/Principal Broker/Manager hereby acknowledge and understand that it will be their responsibility to become familiar with and abide by the appropriate rules and regulations of the particular SentriLock System provider.

Signature of Agent	Date
Signature of Designated REALTOR®/Principal Broker/Manager	Date

To Be Completed by Primary Association/Board Office

Primary Association:_____ SentriCard Issued By:_____

SentriCard#:_____

NAR ID#_____

Real Estate/Appraiser License Verification:

❒Maryland#_____ ❒Virginia# _____ ❒Delaware#_____

Verified By:

Name	Organization	Date