



Pre-authorized Payment Agreement

Please check off one box below:

- I am a new Subscriber
 I am already a Subscriber and would like to select a different payment option and/or make changes to my bank or credit card information.

I have read the Hawaii Information Service License and Access Agreement and by my signing this form below, I agree to its terms and conditions and will abide by the MLS Hawaii, Inc. dba Hawaii Information Service Rules and Regulations. I also agree that I must have an active license to sell or appraise real estate in the State of Hawaii in order to subscribe to the service as a PBS, PAS or Associate Subscriber, and that in order to access and use the service, I must have a computer system that meets the requirements as outlined by Hawaii Information Service.

I authorize Hawaii Information Service (HIS) to keep my signature on file and to charge my VISA, MasterCard or debit my checking/savings account for the following fees. (See Exhibit B, Schedule of Fees and Charges)

- Initial Subscription Fees
- Subscription Fees (Assessed in advance no more frequently than quarterly. Quarterly payment periods are July-Sept, Oct-Dec, Jan-Mar and Apr-June.)
- Training or Class Fees

Please Sign Here: X _____

Please Print your Name: _____
Last Name
First Name
Middle Initial(s)

Name of Your Company/Office/Employer: _____

If you are a PBS or PAS, you will be copied on each notice of non-payment of subscription, service or rules violation fees by your Associate or Support Subscribers. Their failure to pay fees may affect service to you and your office. In the event that our efforts to collect fees from one of your affiliated subscribers are unsuccessful, you will be notified and offered an opportunity to pay for your affiliated subscriber's fees on his/her behalf to avoid service to you and your office from being interrupted or terminated. Please report changes to your office roster to HIS within 24 hours, including any changes in licensure status for subscribers affiliated with your office. You are responsible for the fees charged to your associate and support subscribers as long as they are on your roster.

Signature of Subscriber's PBS or PAS X _____

Please select one of the payment cycles below

- Annually**
 Semi-Annually
 Quarterly

I understand that this form is valid as long as I am a subscriber of HIS. To prevent service interruption, I will notify HIS of any change in my credit card, checking or savings account. Furthermore, I understand that charges will continue until HIS is otherwise notified in writing. I agree to abide by the HIS Subscriber License and Access Agreement, including, but not limited to Section 7(c), which states: "Fees are non-refundable and will not be prorated."

Billing Address: _____
Street
City
State
Zip Code

Email Address (Required): _____

Please select and complete only one payment option below

- Option 1 – Charge My Credit Card**
 Visa MasterCard Acct#: _____ - _____ - _____ - _____ Exp Date: _____/_____/_____

Cardholder Signature: X _____ Date: _____

The above account information should be used for the following Subscriber, if other than the credit card account holder:

Please print full name: _____

- Option 2 – Debit My Bank Account**
 Checking (Attach a copy of a voided check) Savings (Attach a copy of a deposit slip)

Name of Bank: _____ Branch: _____

Bank Address: _____
Street
City
State
Zip Code

- Option 3 – Payment by Check**
 If paying by check, please mail your check made payable to Hawaii Information Service and this form to the address below by the billing due date.

- Option 4 – Annual Office Billing** (This option is only available to PBS, PAS or DR, if he/she is paying for all of his/her office Associate and Support Subscribers' subscription fees.)

Office Payment Method: _____

Please print PBS/PAS's Name: _____

PBS/PAS Signature: X _____ Date: _____

Please mail or fax this form to Hawaii Information Service to activate your service. Allow 48 hours for activation (excluding weekends and holidays). An email confirmation will be sent to you with your username and password to access the database.

Hawaii Information Service, 680 Iwilei Road #777, Honolulu, HI 96817

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