



APPLICATION TO TRANSFER FORM

This form is to be used if you are an **active** REALTOR or MLS member and are transferring from one office to another. If you have been inactive for longer than a year please contact the Association office and speak to membership. It can take up to 24 hours for your membership to transfer to your new office. Please send form to: natalygavar@gmail.com

If you are transferring during billing cycle, you will have to submit payment in order to transfer. If you are unsure, please contact the Association office and speak with membership.

Please note: You will not be transferred until the DRE records reflect the change to the new broker.

Date: _____ **MLS ID #: gant.** _____

Agent Name: _____

Current e-mail: _____

Current Home Address: _____

New Office Name: _____

New Office Address: _____

Signature of New Broker: _____

PREVIOUS BROKER INFORMATION:

I, _____, allow GAVAR Staff to cancel any active
Broker's Name

listings in _____. ***Please provide list.***
Agent's Name

it will be the responsibility of the previous broker to cancel the listings out in the MLS.

Broker's Signature _____

FOR OFFICE USE ONLY

New Firm #: _____ **Changes in NRDS:** _____
Membership Type _____

Staff Initials: _____ **Date of Transfer:** _____