

## STAFF CONTACT Sarah Townsend E: sarah@vcrealtors.com P: 805-981-2100 F: 805-981-2107

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## Transfer Fee: \$20

**PREVIOUS INFORMATION** 

## **OFFICE TRANSFER FORM**

Name:		Member #:	
Former Office:		Agent Email:	
Signature of Former Broker		Effective Date:	
MLS LISTINGS			
$\hfill \Box$ Yes, I have active listings in the MLS. (Please complete a	MLS listing transfer form)		
NOTICE TO SEVER (TERMINATE)			
<ul> <li>Yes, I am terminating my membership with VCCAR ar (The \$20 fee does NOT apply to severing/termination.)</li> <li>NEW INFORMATION</li> </ul>	nd I am no longer affilia	ated with the company no	ted above.
ew Office: MLS Office Code:			
Address:			
Office Phone #:	Agent Email: _		
Agent Mobile #:	Agent Home #	:	
Signature of New Broker	Effective Date:	:	
PAYMENT INFORMATION			
Name as shown on card	Phone		
Card Billing Address	City	State	Billing Zip Code
American Express Discover	Mastercard	Visa VISA	
Card Number	Exp. Date	CSC/CVC Code	Billing Zip Code
Signature			<b>\$</b> Total Charge

## UPLOAD YOUR COMPLETED FORM AT WWW.VCREALTORS.COM/FORMS

