

New Office /  
Office Transfer Application



**Agent Information**

Agent Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Agent Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

*(This will appear on your listing)*

E-mail Address: \_\_\_\_\_ Website Address: \_\_\_\_\_

DRE License: \_\_\_\_\_ Expire Date: \_\_\_\_\_

\_\_\_\_\_  I Will  I Will NOT allow the following listings to be transferred to this salesperson's new office  
*(PRINT name of Current Broker)*

Listing # \_\_\_\_\_ Listing # \_\_\_\_\_, Listing # \_\_\_\_\_ Listing # \_\_\_\_\_

Listing # \_\_\_\_\_ Listing # \_\_\_\_\_, Listing # \_\_\_\_\_ Listing # \_\_\_\_\_

**Release by Current BROKER:** \_\_\_\_\_

*(Signature of Current BROKER)*

**New Office Information**

Firm Name: \_\_\_\_\_ Firm/Corporate DRE # \_\_\_\_\_

Office Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Office Fax: \_\_\_\_\_

**Processing Fees and Dues are non-refundable**

**Office Transfer Fee: \$25.00**

**New Office Setup Fee: \$125.00**

**New BROKER:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*The licensee listed above is affiliated with my broker/corporate license. This authorizes the above licensee to access CRM/LS. (Signature of New BROKER)*

I hereby apply for continued membership in the Local Association of REALTORS®, the California Association of REALTORS, and the National Association of REALTORS. I agree to continue to abide by the Constitution, the bylaws, Rules and Regulations and the Code of Ethics, including the obligation to arbitrate any further disputes with another member of the Local Association, or member of the California Association, or member of any cause except transfer, I will discontinue the use of the designation REALTOR in all certificates, signs, or other indication of membership.

**Agent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_