

## **Member Transfer Form**

Member Name:	
Member SMARTMLS ID:	
Old Company Name:	Office Code:
Old Company Address:	
New Company Name:	Office Code:
New Company Address:	
Effective Date://	
NRDS #:	License #:
Agent Email: *Please print clearly	
Agent Signature	
Broker Signature	 Date

\* Both Broker and Agent signatures are required prior to processing request.