



# LISTING TRANSFER FORM

Processing time 1 to 2 business day

**\* Required**

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Listing Agent Name \_\_\_\_\_ Member # \_\_\_\_\_

Old Office Name \_\_\_\_\_

Address \_\_\_\_\_

Direct Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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Listing Agent Name \_\_\_\_\_ Member # \_\_\_\_\_

New Office Name \_\_\_\_\_

Address \_\_\_\_\_

Direct Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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Transfer Listing # \_\_\_\_\_ Address: \_\_\_\_\_

Transfer Listing # \_\_\_\_\_ Address: \_\_\_\_\_

Transfer Listing # \_\_\_\_\_ Address: \_\_\_\_\_

Transfer Listing # \_\_\_\_\_ Address: \_\_\_\_\_

Transfer Listing # \_\_\_\_\_ Address: \_\_\_\_\_

Transfer Listing # \_\_\_\_\_ Address: \_\_\_\_\_

I hereby agree and authorize the transfer of the above listings.

\_\_\_\_\_  
Original Broker's Name (Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Original Broker's Signature

\_\_\_\_\_  
New Broker's Name (Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
New Broker's Signature