

**EL DORADO COUNTY ASSOCIATION OF REALTORS®
and METROLIST SERVICE CENTER**

Agent Transfer/Change Form

As of January 1, 2009, there will be a \$20 fee for all transfers. Please make payment by cash, check, or credit card, prior to transferring offices. Transfers will be processed upon receipt of payment.

Fax this form to EDCAR (530) 676-0180 or Email to membership@edcar.org

OLD Information: REQUIRED

Last Name _____ First Name _____ Initial _____

Office Name _____ Agent's DRE license _____

Office Address _____

_____ Change of office/broker* _____ Personal Info (home address, email, etc)

*Requires a copy of your DRE license/ELicensing or completed DRE214 reflecting this information

NEW Office Affiliation: REQUIRED

Office Name _____ MLS Office Code _____

Office Address _____

City _____ State _____ ZIP _____

Office Phone _____ Office Fax _____

NEW Personal Information: EMAIL REQUIRED*

Last Name _____ First Name _____ Initial _____

Home address _____

Primary Phone _____ Cell Phone _____

*Email Address _____

Signatures:

MLS Subscriber/Agent/REALTOR/Appraiser

Date

Broker/Appraiser

Date