



Membership Update / Return of License / Report of Transfer Form

Date: _____ Firm: _____

IMPORTANT: Please specify report by checking one below:	
<input type="checkbox"/> Transfer to different company within BAAR (section II and III) – new office <u>MUST</u> also be a member of BAAR	
<input type="checkbox"/> Change in Name/Address/Phone Number (top section)	<input type="checkbox"/> Transfer to a referral company (section I)
<input type="checkbox"/> Return of License (section I)	<input type="checkbox"/> Transfer to different Board/Assn (section II)

Name of Licensee (Member): _____
Home Phone: _____ Cell Phone: _____
Home Address: _____
City: _____ State: _____ Zip: _____
Email address (if changed): _____ NRDS _____

I. PLEASE COMPLETE IF REPORTING A RETURN OF LICENSE VERIFICATION:

Broker/Manager confirms that _____ is no longer licensed with Broker Member and that his/her license has been returned to the Real Estate Commission.

(Firm Name) (Date of Severance) (Signature of Broker/Manager)

II. PLEASE COMPLETE IF REPORTING A LICENSE TRANSFER:

Office that the member is transferring to MUST also be a member of BAAR

TRANSFER FROM:

Current Firm: _____ Office NRDS: _____
Firm Address: _____ City: _____ State: _____ Zip: _____
Board/Association: _____

TRANSFER TO:

New Firm Name: _____ Office NRDS: _____
New Firm Address: _____ City: _____ State: _____ Zip: _____
Board/Association: _____

III. VERIFICATION for TRANSFER THAT INDIVIDUAL IS LICENSED WITH BROKER MEMBER:

Broker/Manager confirms that _____ is in fact, licensed with Broker Member, Broker Member agrees to notify BAAR in writing should said licensee and/or Broker Member terminate affiliation.

(Firm Name) (Signature of Broker/Manager)

