



Member Transfer Form

All members transferring offices who have Primary or Secondary REALTOR membership with NVBR are required to complete this form and submit along with the \$40.00 NVBR transfer fee and a signed copy of the Vermont Real Estate Commission's "Change of Information Form". Please make checks payable to NVBR, PO Box 814 Williston, VT 05495 or to pay by credit card please call 802-862-6407. Fax forms to 802-862-2306 or email karissa@vtrealstate.com.

PLEASE PRINT

Name as shown on License _____

Name to appear on roster _____ Nickname _____

License No. _____

License Effective Date (Most Recent): _____

License Type: (circle one) Broker Salesperson Appraiser

NRDS Number: _____

Date of Birth (DD/MM/YYYY): _____

Home Street Address _____

City _____ ST _____ ZIP _____

Home Mailing Address _____

City _____ ST _____ ZIP _____

Home Phone _____ Cell Phone _____ Home Fax _____

E-Mail Address _____ Agent Website _____

Preferred Phone: (circle one) CELL HOME OFFICE

Preferred Fax: (circle one) HOME OFFICE

Preferred Address for Mail: (circle one) HOME OFFICE

Preferred Address for Publications: (circle one) HOME OFFICE

Firm Transferring From _____

New Firm _____

Designated REALTOR of Firm _____

Office Street Address _____

Office Mailing Address _____

City _____ ST _____ ZIP _____

Office Phone _____ Office Fax _____

Office Website _____

Member Signature _____ Date _____