



# CAAR Agent Office Transfer Form

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Use this form to transfer a REALTORS'® membership in CAAR (**Section I**). If the REALTOR® is currently registered in CAAR MLS, and needs to remain registered in the MLS, the principal or authorized managing broker must complete and sign (**Section II**).

REALTOR® Name: \_\_\_\_\_

Former Firm Affiliation: \_\_\_\_\_ branch office (if applicable): \_\_\_\_\_

New Firm Affiliation: \_\_\_\_\_ branch office (if applicable): \_\_\_\_\_

New Email Address (if changed) \_\_\_\_\_

\*List any support staff who can assume identity in new firm: \_\_\_\_\_

\_\_\_\_\_

## SECTION I - Complete this section to transfer CAAR REALTOR® Membership for the above-named individual.

I certify that the firm holds a real estate license for the above-named REALTOR®.

Effective Date: \_\_\_\_\_ (effective date can not be before the date CAAR receives this form)  
To transfer ACTIVE listings you will need your former Broker to complete that information on the CAAR Cancellation form.

\_\_\_\_\_  
\*Principal or Authorized Managing Broker's Signature

\_\_\_\_\_  
Date of Signature

## SECTION II - Complete this section to register the above-named REALTOR® in CAAR Information Services (MLS). I understand the following:

I, \_\_\_\_\_, the principal or authorized managing broker of the above-named firm/branch office, hereby register the above named REALTOR® as an authorized user of CAAR MLS under my membership. I understand the following:

1. My firm is responsible for CAAR MLS fees and fines incurred by this user.
2. I am responsible for ensuring that this user complies with CAAR MLS policies and the CAAR MLS Rules and Regulations.
3. The CAAR Board of Directors reserves the right to deny or revoke CAAR MLS services for any person.
4. The user will continue to be able to use CAAR MLS and incur fees until and unless I cancel their registration or the CAAR Board of Directors revokes their CAAR MLS usage privileges.

Effective Date \_\_\_\_\_ (effective date can not be before the date CAAR receives this form)

\_\_\_\_\_  
\*Principal or Authorized Managing Broker's Signature

\_\_\_\_\_  
Date of Signature