

TOPSAIL ISLAND ASSOCIATION OF REALTORS, INC. TRANSFER APPLICATION

TRANSFER APPLICANT INFORMATION

Name as shown on NCREC License:

License Number:

NRDS Number:

Current Address:

City:

State:

ZIP Code:

Email:

Home Phone:

Cell Phone:

FIRM TRANSFERRING FROM

Name of Firm:

Firm Address:

Broker In Charge:

Phone:

E-mail:

Fax:

City:

State:

ZIP Code:

Position:

Website:

NORTH CAROLINA REAL ESTATE COMMISSION

Has the NCREC been notified?

Yes

Date of Notification:

No

LISTINGS

Listings Should Be *(Please circle)*:

Transferred with Agent

NOT Transferred with Agent

Present BIC Signature:

FIRM TRANSFERRING TO

Name of Firm:

Firm Address:

Broker In Charge:

Phone:

E-mail:

Fax:

City:

State:

ZIP Code:

Position:

Website:

Effective Date:

ASSOCIATION OFFICE USE ONLY

Total Amount Due:

Transfer Fee: \$200

Date Fees Paid:

Method of Payment:

SIGNATURES

I agree to abide by the Code of Ethics, By Laws, and Rules/Regulations of Topsail Island Association of REALTORS, the State Association, as well as the National Association. I acknowledge failure to promptly pay all established fees, dues, and assessments will terminate my membership. BIC's signature affirms that above agent is now affiliated with his/her firm.

Signature of Applicant:

Date:

Signature of New Broker In Charge:

Date: