



# WEST ESSEX BOARD OF REALTORS®

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(973) 655-9660 Fax (973) 655-8070

[Http://www.westessexbor.com](http://www.westessexbor.com) e-mail [info@westessexbor.com](mailto:info@westessexbor.com)

## REGISTRATION TRANSFER

Date: \_\_\_\_\_

I hereby certify the following named REALTOR® is now employed by me and that his/her license is in my possession. I request transfer of Salesperson registration under the name of my office.

Salesperson: \_\_\_\_\_

NRDS # \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Previous Office: \_\_\_\_\_

Receiving Member Office: \_\_\_\_\_

New Designated REALTOR®: \_\_\_\_\_  
(Signature)

E-Mail Address: \_\_\_\_\_

**\*\*No transfers will be made via telephone\*\***

This transfer form must be accompanied with a \$10.00 fee.

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### Board Office use only

Check# \_\_\_\_\_

REMS \_\_\_\_\_

NRDS \_\_\_\_\_

N/L \_\_\_\_\_

REV 7/04

