



# Transfer/ Change Form

Please submit a separate form for each individual.  
Allow two working days after receipt for processing.  
Email: [info@btvar.com](mailto:info@btvar.com)

It is extremely important that this form be submitted as soon as a change in status is made. A form MUST be completed for ALL changes. Names will only be removed from a license roster upon receipt of this form. Please note it is illegal for non-members to use the term REALTOR®.

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

**PLEASE PRINT**

Name: \_\_\_\_\_

License # (TN/VA) \_\_\_\_\_

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

**License transfer from:** \_\_\_\_\_

To (New Office): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

**License is no longer hanging in a REALTOR® office.**

**License is inactive/retired, and will no longer be in the real estate profession.**

**Change of:** Designated/Managing Broker to: \_\_\_\_\_

**Change of:** Home address: \_\_\_\_\_

Home #: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax #: ( \_\_\_\_\_ ) \_\_\_\_\_

**Add or change email address:** \_\_\_\_\_

**Preferred Mail to:**     Firm     Home

**Preferred Fax:**     Firm     Home

**Broker has given notice to:**     Association of REALTORS®     TN/VA MLS

License Department (license mailed in)

**Other:** \_\_\_\_\_

Thank you for changing your database accordingly.

\_\_\_\_\_  
(Agent Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(New Broker Signature for Transfers)

\_\_\_\_\_  
Date