

GREATER LAS VEGAS ASSOCIATION OF REALTORS®

1750 E. Sahara Ave., Las Vegas, NV 89104

(702) 784-5000 fax (702) 732-1304

TRANSFER AND DROP NOTICE

Date _____

Please Check: Broker REALTOR® Non-Member (Sales Person)

Member # _____ License # _____

Name (Last, First, MI) _____

Present Address _____ City/State/Zip _____

Home Phone _____ E - Mail _____

Preferred Mailing Address: Home Office

NOTE: Transfer/Drop Notices received after 5:00 p.m. Monday – Friday will not be processed until the following business day.

DROPPED FROM (Drop, License returned to Division):

Company Name _____ FIRM # _____ CODE _____

Office Address _____

Office Phone _____

I hereby acknowledge that I have notified the terminated licensee of this action pursuant to the provisions of NRS 645.

Broker Signature _____

TRANSFER TO:

COMPANY NAME: _____ FIRM # _____ CODE _____

Office Address _____

Office Phone _____ *Broker Signature _____

* Broker/Agent hereby authorizes GLVAR to release information regarding agent’s outstanding bill, if any, to new Broker if requested prior to final transfer to new Broker.

Note: Your GLVAR records will be updated **only** upon receipt of a copy of the receipt from the Nevada Real Estate Division showing your license transfer.

If transferring listings, have you submitted the “Listing Transfer Form” Yes No

Member of MLS or CLS or Both Agent signature _____

GLVAR Office Use Only:

Lock Box Key Returned: Yes No ZipForms Access is transferred: Yes No

Delivered: By Mail Faxed Broker-In Person Agent-In Person Runner

Received by _____ Date _____