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MLS TRANSFER REQUEST

FORM MUST BE PROPERLY EXECUTED AND SIGNED BY THE TRANSFEREE, THE MEMBER PARTICIPANT OF THE FIRM YOU ARE LEAVING AND THE MEMBER PARTICIPANT OF THE FIRM YOU ARE TRANSFERRING TO

TRANSFER MUST BE COMPLETED AT NC REAL ESTATE COMMISSION PRIOR TO SUBMITTING TO MLSCV

TRANSFERRING SERVICE *(MUST HAVE BOTH MEMBER PARTICIPANT SIGNATURES TO PROCESS)*

SUBSCRIBER NAME: _____ _____
LAST *FIRST* *MI* *REAL ESTATE LICENSE #*

CURRENT OFFICE AFFILIATION: _____

I, THE MEMBER PARTICIPANT, ALLOW ABOVE SUBSCRIBER TO TRANSFER SUBSCRIPTION.

MEMBER PARTICIPANT NAME: _____

MEMBER PARTICIPANT SIGNATURE: _____ DATE: _____

***TO TRANSFER LISTINGS IN MATRIX**, EMAIL THE LISTING TRANSFER FORM TO SUPPORT@CAROLINAHOME.COM OR CONTACT CAROLINAMLS AT 828.239.2900. THE MEMBER PARTICIPANT MUST SIGN THE LISTING TRANSFER FORM ALSO.*

NEW OFFICE AFFILIATION: _____ **DATE OF TRANSFER REQUESTED:** _____

OFFICE PHONE: _____ SUBSCRIBER CELL PHONE: _____

NEW EMAIL: ❑ YES ❑ NO IF YES, EMAIL ADDRESS: _____

NEW WEBSITE: ❑ YES ❑ NO IF YES, WEBSITE URL: _____

DO YOU CURRENTLY SUBSCRIBE TO SUPRA EKEY? ❑ YES ❑ NO ARE YOU CURRENTLY A MEMBER OF A TEAM? ❑ YES ❑ NO

TRANSFERRING SUBSCRIBER SIGNATURE: _____ DATE: _____

I, THE MEMBER PARTICIPANT, REQUEST MLSCV SERVICES FOR THE TRANSFERRING SUBSCRIBER.

MEMBER PARTICIPANT NAME: _____

MEMBER PARTICIPANT SIGNATURE: _____ DATE: _____

For Office Use Only

DATE RECEIVED: _____ DATE TRANSFERRED: _____ EMAIL VERIFICATION SENT _____