



Brokerage Transfer Form

Agent Name: _____ Date: _____

Agent's E-Mail Address _____

REQUIRED NAR NRDS# OR WY Real Estate License #

Transfer From: (To be completed by broker/manager of firm agent is leaving)

Firm Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Broker Name: _____

Broker Signature (REQUIRED) _____

Reason for Transfer: License Returned to WREC: Inactive or Referral

Transfer to New Firm Leaving Area or Industry Deceased Other

Transfer To: (To be completed by broker/manager of new firm)

New Office Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Broker Name: _____

Broker Signature (REQUIRED): _____

**Return Completed Forms via email to
Admin@NWBOR.com**

For Office Use

Date Change Taken: _____ **By User:** _____