



Member Transfer Application

All applicants transferring between MEMBER firms who have Primary or Secondary REALTOR® membership with VAR® are required to complete this application and submit along with a signed copy of the Vermont Real Estate Commission's "Change of Information Form", or copies of new licenses.

Please return form with any associated fee to SCVBR® and provide a copy to VAR® by email to racheal@vermontrealtors.com

PLEASE PRINT LEGIBLY

Name as shown on License _____ Name to
appear on roster _____ Nickname _____ License
No. _____ Other License No. _____ License Effective Date
(Most Recent): _____

License Type: (circle all that apply) Broker Salesperson Appraiser

NRDS Number: _____

Home Address _____

City _____ ST _____ ZIP _____

Home Phone _____ Cell Phone _____ Pager _____

E-Mail Address(**REQUIRED**) _____ Agent Website _____

Preferred Phone: (circle one) HOME OFFICE CELL

Preferred Address for Mail : (circle one) HOME OFFICE

Office Transferring From _____ New

Office _____ Off Lic# _____

Designated REALTOR®/Managing Broker of New Office _____

Office Address _____

City _____ ST _____ ZIP _____ Office

Phone _____ Office Fax _____ Office Website

Member Signature _____ *Date* _____

Vermont Association of Realtors® 148 State Street, Montpelier, VT 05602 802-229-0513