WILLIAMSON COUNTY ASSOCIATION OF REALTORS
TRANSFER FORM

Realtor Name _____ **License Number** _____

PREVIOUS Designated Realtor _____

NEW Designated Realtor _____

NEW Firm Name _____

OFFICE USE ONLY

Date Rcvd:_____

Rcvd By:_____

$ Rcvd:_____

Ck #:_____

Processed:_____

NRD'S #:_____

REALTOR'S INFORMATION: All information must be completed for transfer.

NEW Firm Address _____ City _____ Zip _____

Home Address _____ City _____ Zip _____

PREFERRED Mailing Address _____ City _____ Zip _____

NEW Office Phone # _____ **NEW** Fax # _____ Home Phone # _____

******E-mail Address:**_____

SUBMIT COMPLETED FORM WITH $30.00 TRANSFER FEE WITHIN 10 DAYS
(Checks should be made payable to WCAoR)
Williamson County Association of REALTORS®
123 E Old Settlers Blvd., Round Rock, TX 78664