

Bay Area Real Estate Information Services, Inc.

# Agent Change Form

Please fax or email to (707) 577-0140 [membership@norcalmls.com](mailto:membership@norcalmls.com)

- Transfer Agent to my Office
- Change Access Privileges
- Change Contact Information

- Discontinue Service
- Return from Leave of Absence
- Request Leave of Absence

**Agent Name:** \_\_\_\_\_ **Agent ID:** \_\_\_\_\_

Home Address Change: \_\_\_\_\_  
Address City Zip

Update E-mail Address: \_\_\_\_\_

Other Change: \_\_\_\_\_

Change the method of sending my quarterly statement to:

E-mail address: \_\_\_\_\_

Mailed paper statement (\$5.00 quarterly charge) to  Home Address  Office Address

\_\_\_\_\_  
Agent Signature Date

### Agent Transferring Offices:

Previous Office Name: \_\_\_\_\_ Previous Office ID: \_\_\_\_\_

New Office Name: \_\_\_\_\_ New Office ID: \_\_\_\_\_

New Office Address: \_\_\_\_\_

*Please Note: For listings to be transferred, the BAREIS Listing Transfer Form must be filled out and signed by both the releasing & receiving Brokers, then submitted with this form to BAREIS MLS®.*

### Agent Returning:

Returning from Leave of Absence / Cancellation: Effective Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(Must include appropriate reactivation fees)

### Agent Cancelling:

Request Leave of Absence (Maximum of one year) - Effective Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Agent is no longer in my office – Office Name: \_\_\_\_\_  
Office ID: \_\_\_\_\_ Effective Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Request cancellation of eKEY Serial # \_\_\_\_\_ OR  I will return ActiveKEY to service center.

Change Agent Access Privileges To:  Co. Wide Manager  Branch Manager  Agent Admin.  Agent Only

\_\_\_\_\_  
Broker Name – Please Print:

\_\_\_\_\_  
BRE Number

\_\_\_\_\_  
Broker Signature

\_\_\_\_\_  
Date



153 Stony Circle, Suite 200  
Santa Rosa, Ca 95401  
707-575-8000 Fax 707-577-0140

Bay Area Real Estate Information Services, Inc. (BAREIS MLS®)

## Listing Transfer Form

Please fax to (707) 577-0140

### From (Previous)

Listing Agent: \_\_\_\_\_ Agent ID: \_\_\_\_\_

Listing Office: \_\_\_\_\_ Office ID: \_\_\_\_\_

### To (Current)

Listing Agent: \_\_\_\_\_ Agent ID: \_\_\_\_\_

Listing Office: \_\_\_\_\_ Office ID: \_\_\_\_\_

**Do you have listings entered on any Reciprocal MLSs that need to be transferred? Yes No**

*If Yes, which MLS? (Check all that apply)*

- MetroList       SFARMLS       MLS Listings Inc.       Contra Costa Assoc.  
 EBRD       Bay East Assoc.       Lake County Assoc.       Other: \_\_\_\_\_

**Which listings should be transferred? (Check all that apply)**

- All Active Listings       All Sold Listings as Listing Agent       All Sold Listings as Selling Agent  
 All Contingent Listings       All Pending Listings       All Expired Listings       All Temp Off Market Listings

**If only certain listings are to be transferred, list the MLS #s of the listings to be transferred below:**

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Please Note:** When transferring listings, the MLS number, days on market and cumulative days on market will remain the same. The property history will also carry over to the new Agent ID / Office ID.

\_\_\_\_\_  
**Signature of Broker Authorizing the Release of Listings**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Signature of Broker Authorizing the Acceptance of Listings**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Printed Name**



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