

**APPLICATION FOR TRANSFER
OF REALTOR MEMBERSHIP IN THE
DES MOINES AREA ASSOCIATION OF REALTORS**

Date _____

DES MOINES AREA ASSOCIATION OF REALTORS:

I herein make application for transfer of REALTOR Membership in the DES MOINES AREA ASSOCIATION OF REALTORS and bind myself, if elected, to conform to the Bylaws and Rules of the said Association.

I have been engaged in the real estate business in Des Moines for the past _____ years and I am now going to be associated with the firm of _____.

I agree that this transfer application shall also act as a resignation from the said Association whenever I shall cease to be associated with a member of the DES MOINES AREA ASSOCIATION OF REALTORS.

As a transfer applicant within or between firms **I enclose a \$25.00 transfer fee.***

NAME OF APPLICANT _____ **SOC. SEC. #** _____
(As on your real estate license)

HOME ADDRESS _____ **CELL PHONE #** _____
(address, city & zip code)

NEW FIRM _____ **OFFICE**

REAL ESTATE LICENSE # _____ **R.E. LICENSE RECEIVED AT FIRM**
(Date)

DESIGNATION(S) YOU HOLD _____
(GRI,CRS,CPM,CRB,RM,MAI,SRA,SRPA,SREA.....)

NEW E-MAIL ADDRESS _____

Previous employment or real estate association in the past five years, including the Firm you are now leaving.

Endorsed by

(Designated REALTOR for firm)

(Applicant)

***NOTE: PLEASE MAKE CHECK OR CASHIER'S CHECK PAYABLE TO THE DES MOINES AREA ASSOCIATION OF REALTORS® 12/01/10**