

ROANOKE VALLEY ASSOCIATION OF REALTORS®

4358 Starkey Road

Roanoke, VA 24018

Phone: (540) 772-0526 or (800) 772-7916

Fax: (540) 772-8058

\$30

TRANSFER

\$30

NAME OF APPLICANT: _____

HOME PHONE #: _____

CELL PHONE #: _____

PRESENT HOME ADDRESS: _____

(CITY) (STATE) (ZIP)

UPDATED EMAIL ADDRESS: _____

▪ HAVE YOU PAID YOUR RVAR DUES FOR THIS YEAR? _____

LICENSE TRANSFERRED FROM:

FIRM/BROKER NAME: _____

FIRM ADDRESS: _____

LICENSE TRANSFERRED TO:

FIRM/BROKER NAME: _____

FIRM ADDRESS: _____

(If Branch Office, State Branch Address)

Notification of this transfer information will be sent to VAR and NAR. Copies of this application will be provided to MLS and Supra Key.

SIGNED: _____

(Applicant)

(Broker)

This area for RVAR use

Received by: _____

Amount: _____

Date: _____

If paying by Credit Card, please provide the following information:

Cardholder Name: _____ Billing Zip Code _____

Credit Card #: _____ Exp Date: _____ 3 Digit Code: _____

(Visa/MC/Discover)

(on back of card near signature)

Payments to the Roanoke Valley Association of REALTORS® are not deductible as charitable contributions. Such payments may, however, be deductible as an ordinary and necessary business expense.