



## MetroList Services, Inc. Agent Change Form

<b>For MLS Use Only</b>
Member Num. _____
Office Num. _____

<b>Fax When Complete To An Admin Center</b>	<b>El Dorado AOR</b> (530) 676-0180 <b>Lodi AOR</b> (209) 368-8289 <b>MetroList Main Office</b> (916) 922-1835 <b>Modesto</b> (209) 549-7079	<b>Placer</b> (916) 624-8023 <b>Sacramento</b> (916) 922-1221 <b>Stockton</b> (209) 954-4196 <b>Yolo</b> (530) 666-7444
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<b>Current Information Required</b>	First Name _____ Middle Initial _____ Last Name _____ BRE License Number _____ MLS Agent ID _____ Office Name _____ Office Address _____ City _____ State <u>CA</u> Zip Code + Four _____ -
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<b>Type of Change</b>	<input type="radio"/> Change of office or broker    AND/OR <input type="radio"/> Personal Information (home address, email, etc.)
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<b>New Personal Information</b>	First Name _____ Middle Initial _____ Last Name _____ Home Address _____ City _____ State <u>CA</u> Zip Code + Four _____ - Home Phone _____ - -      Cell Phone _____ - - Primary Phone _____ - -      Secondary Phone _____ - - <small>(Only Secondary # appears on metrolistmls.com)</small> Preferred Mailing Address: <input type="radio"/> Home <input type="radio"/> Office Email Address _____
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<b>New Office Affiliation</b>	<p style="text-align: center;">*Requires a copy of your BRE license or completed BRE form 214 reflecting this information*</p> Office Name _____ MLS Office ID _____ Office Address _____ City _____ State <u>CA</u> Zip Code + Four _____ - Office Phone _____ - -      Office Fax _____ - -
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<b>Signature(s)</b>	_____ <b>Subscriber Signature</b> <small>Agent/Appraiser/Broker Subscriber</small>	_____ <b>Print Subscriber Name</b>	_____ / ____ / ____ <b>Date</b>
	_____ <b>Participant Signature</b> <small>Broker/Appraiser</small> <small>(Not required if changing personal info only)</small>	_____ <b>Print Participant Name</b>	_____ / ____ / ____ <b>Date</b>