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Member Transfer Request

EABOR® does not guarantee same-day account activation. We now reserve a 48-hour period to process applications and create Member and Subscriber accounts.

Membership Type:

Agent: _____ Appraiser: _____ Qualifying Broker: _____ Company: _____

Please supply all information that will be updated with your transfer.

Member Name: _____ Nickname: _____

Alabama License Number: _____ NRDS#: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Cell: _____ Work: _____ Email: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax #: _____ E-mail: _____

Please initial the following items as proof of acknowledgement:

_____ A written release from your previous Broker must be submitted to our office before our staff can transfer any current property listings to your new Brokerage.

_____ I understand that it is the responsibility of the member/subscriber to report any account changes to EABOR as soon as possible.

_____ All quarterly billing that is impacted by this transfer must be negotiated between the Member and Broker.

Signature: _____ Date: _____