



C.A.R. Member Transfer Notification Request

According to Real Estate License Act of 2000 Sec. 5-40: Date of Request:			
b)	employment is terminated by the spoilicense endorsed by the sponsoring by a copy of the license of the license of the license of the license shall subject the sponsorial licensee whose association with a spoiling broker pursuant to subsect when a licensee accepts employment managing broker shall send, by certification signature upon delivery, to IDFPR a dof the licensee of why the endorsed of the licensee of the li	nsoring brok observation 2 days of the license of t	at or association with a sponsoring managing broker or the er, the licensee shall obtain from the sponsoring broker his or her ing the termination. The sponsoring broker shall surrender to IDFPR is of the termination or shall notify IDFPR in writing of the is not surrendered. Failure of the sponsoring broker to surrender a discipline under Section 20-20 of the Act. The license of any ser is terminated shall automatically become inoperative insee accepts employment or becomes associated with a new his Section. On with a new sponsoring managing broker, the new sponsoring urn receipt requested, or other delivery service requiring a nasor card, along with the licensee's endorsed license or an affidavite surrendered, and shall pay the appropriate fee prescribed by rule e changes in the registration of the licensee.
off license paying by o paying by o or drop it o	or a copy of the <i>affidavit of the</i> Credit Card, submit this form via s check make it payable to Chicago	licensee, as secure file (Association CAR Centra	form. Attach a copy of the 45 day sponsor card , signed is to why the endorsed license was not surrendered. If upload at http://www.chicagorealtor.com/upload . If nof REALTORS® and mail it to the "Central" address below, al: Monday thru Friday, between the hours of 8:30am on and 1:00pm-4:00pm.
Agent First Name:Las		t Name:	C.A.R.ID#:
RE License #:		Old C.	.A.R. Office ID #
Old Office	Name:		
New Responsible Managing Broker First and Last Name:			
Office Name:		_ Office Ad	dress:
C.A.R. Office ID#: Office		e Phone:	Office Fax:
New Phone for MLS:()Agent's New Email Address:		New Email Address:	
Signature of	of Responsible Managing Broker:_		
\$50.00 Tr	ansfer Fee Required: Circle on	e: Visa, M	aster Card or AMEX
Card #:		_Exp:	Signature
By default	, agents are giving the following r	ights within	ConnectMLS. Should you wish to disallow any of the
following o	options, please check off the box	and those c	hecked will NOT be given to the agent. Rights can be
updated in	the future by contacting us at 31	2-803-4900	
	Use custom reports		Search tax records
	☐ Hotsheets		☐ Enable advanced AMS search
	Open house/tours search		Add/Edit own listings
	Search off-market listings		Search active listings (requires search off-market listings)

□ E-mail listings/prospecting

Use the financial tools