North Oakland County Board of REALTORS® Membership Status Change Form PRIMARY & SECONDARY REALTORS®

Date:	Contact	Person:	
Firm License ID	#		
Firm Name:			
Address:			
C	ity	State	Zip
Phone No.		Fax #:	
	_	t, please complete the followi	
<u>Circle One</u>	<u>Name</u>		<u>License #</u>
☐Transfer ☐Dele	ete		
Transfer to:			
☐Transfer ☐Dele	ete		
Transfer to:			
☐Transfer ☐Dele	ete		
Transfer to:			

For all **NEW** licensed agents, a membership application must be completed and submitted to NOCBOR along with the appropriate Board dues.

(NOCBOR will forward to Realcomp II Ltd. all changes, please **DO NOT** send this form to Realcomp II Ltd.)

FAX TO: (248) 674-8112 - e-mail membership@nocbor.com