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BOARD TRANSFER TO NEW OFFICE

This form is to transfer from a different board to LRRRA
*Attention Member: Complete form and return to LRRRA at the address above
with the appropriate processing fee.*

NRDS ID #: _____ LICENSE #: _____

REALTOR® NAME: _____

PREVIOUS FIRM: _____

PREVIOUS BOARD: _____

NEW OFFICE: _____

PREFERRED MAILING ADDRESS: _____

CITY/STATE: _____ ZIP: _____

(Is this an address change? ___ Yes or ___ No)

PREFERRED EMAIL ADDRESS: _____

PREFERRED PHONE NUMBER: (_____) _____

FOR OFFICE USE ONLY

Date Received: _____

Date Processed: _____

Fee Paid (Local Admin & Dues): _____