PLEASE PRINT

SOUTHLAND REGIONAL ASSOCIATION OF REALTORS®, INC.

NEW BRANCH OFFICE

(The DRE must show the new branch address on the license to process)

When a REALTOR® opens a branch office, this form must be submitted to the Association to add this new office to the membership account. ***A copy of the Department of Real Estate license must be submitted with the Branch Office Notification Form.***

Firm Name: _____

Branch Office Address: _____

City: _____ State: _____ Zip code: _____

Office Phone: _____ Fax #: _____

Branch Office Manager: _____

Branch Office Manager Email: _____

Branch Office/CORP/BROKER'S DRE License Number: _____

Responsible REALTOR®/Broker Email: _____

Responsible REALTOR®/Broker Membership #: _____

Date: _____ Responsible REALTOR®/Broker Signature: _____

FOR ASSOCIATION USE ONLY

Branch Office Firm Number: _____

Type of Office *(Circle One)*: **Board Office** **MLS** **Referral** **Affiliate**

Return by Fax: (818)-786-0364 and or Email: membership@srar.com