



# MULTIPLE LISTING SERVICE OF SOUTHERN ARIZONA

## Lockbox Transfer Form

To be completed by original owner (Transferor) of lockbox

This is to inform MLSSAZ and Supra that:

Transferor's Name: \_\_\_\_\_ Member ID: \_\_\_\_\_

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_

Wishes to transfer possession of the following Supra Lockboxes to the below Transferee. I have verified with MLSSAZ that the Transferee is eligible to have these lockboxes.

**List of Lockboxes to be transferred:**

Lockbox Serial Number

Lockbox Serial Number

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please e-mail me at the following e-mail address when transfer is complete: \_\_\_\_\_

To be completed by new owner (Transferee) of lockbox

As the new responsible owner of such Lockboxes, I hereby accept and assume all rights and obligations pursuant to my Supra System Lease Agreement and MLSSAZ Rules and Regulations.

Transferee's Name: \_\_\_\_\_ Member ID: \_\_\_\_\_

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please e-mail me at the following e-mail address when transfer is complete: \_\_\_\_\_

Per MLSSAZ Rules and Regulations, this form is to be completed and signed by both parties and submitted to MLSSAZ along with the lockboxes for transfer and programming. MLSSAZ will only provide lockbox services to the box owner as registered in the MLSSAZ Supra Database. Please email completed form to [amym@mlssaz.com](mailto:amym@mlssaz.com) for processing.

Transfer completed by : \_\_\_\_\_ on: \_\_\_\_\_