

Office Use Only

Member # \_\_\_\_\_ Dues \_\_\_\_\_ Application Fee \_\_\_\_\_ Orientation \_\_\_\_\_



# Central Carolina REALTORS® Association

## Firm Transfer

Name \_\_\_\_\_  
As it appears on your SC real estate license

S.C.R.E.C. License No: \_\_\_\_\_ NRDS Number: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone No. \_\_\_\_\_ Primary E-Mail Address \_\_\_\_\_

### Firm Information

New Firm Name \_\_\_\_\_ Broker-In-Charge \_\_\_\_\_

Firm Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Firm Phone No. \_\_\_\_\_

Date of Transfer: \_\_\_\_\_ Previous Firm; \_\_\_\_\_

Have you ever been disciplined by a licensing agency, or had your real estate license suspended or revoked? Yes \_\_\_ No \_\_\_

Have you ever been convicted of a felony? Yes \_\_\_ No \_\_\_

If you answered yes to any of the above, please attach copies of the discipline specifying the place(s) and dates(s) of such action, and detail the circumstance relating thereto.

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

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

Please Submit this completed and signed application to  
membership@ccrasc.com or submit it to our office



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