



RESIGNATION FORM

\*In order to avoid paying current months dues, please submit this form no later than the 5th of the month.

Circle all that applies:

Association MLS Key/box Return No Key Return Co-op Key Key Lost/Stolen No Key Service

Name: \_\_\_\_\_ Member # \_\_\_\_\_

Office Name: \_\_\_\_\_

Active/Ekey KEY # \_\_\_\_\_ ibox# \_\_\_\_\_

Please be aware that according to our agreement with Supra, any SFAR Member with an inactive Active Key has 30 days to return the equipment to the SFAR office, or your key deposit will be forfeited.

Key Deposit Mailing Address

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

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

\_\_\_\_\_ is also requesting that his/her membership in the San Francisco Association of REALTORS® or the San Francisco Multiple Listing Service be terminated and that his/her name be removed from the e-mail lists.

If there should be a balance owed to the San Francisco Association of REALTORS® or the San Francisco Multiple Listing Service, the undersigned agrees to pay the balance shown herein within thirty (30) days.

Signature Agent/Broker: \_\_\_\_\_ Date: \_\_\_\_\_

Below is For Staff Use:

The following is a breakdown of monies owed either to the San Francisco Association of REALTORS®, the San Francisco Multiple Listing Service, or the person named above:

Key Deposit Refund \$ \_\_\_\_\_ Monies Owed \$ \_\_\_\_\_

Table with 4 columns: Current Status, New Status, Effective Date, and rows for SFAR, MLS, KEY.

ACCOUNTING DEPARTMENT USE:

OWES REFUND WRITTEN SFAR OFF

Table for accounting department use with rows for LATE FEE, SFAR, 10% SERVICE FEE, MLS, 10% SERVICE FEE, KEY, 10% SERVICE FEE, and TOTAL.

Initial: \_\_\_\_\_

Scanned

Membership Supra

SFAR A/R USE ONLY

A/R N/L INITS: \_\_\_\_\_ DATE: \_\_\_\_\_

Listing Found: Yes or No

Transferred to Broker/Branch Manager: \_\_\_\_\_