Agent/Office Transfer Authorization Form 2026
Las Cruces Association of REALTORS®

Once your completed form is submitted, please allow 2-3 days for your records to fully update across all platforms.

AGENT INFORMATION

Name:_____ **Date:**_____

Phone: _____ **Email:**_____

TRANSFER INFORMATION

Old Office Name: _____ **Office MLS ID**_____

Severing Broker Signature: _____ **Date:** _____

New Office Name: _____ **Office MLS ID**_____

Hiring Broker Signature: _____ **Date:** _____

Agent Signature: _____ **Date:** _____

By signing, the Qualifying Broker is aware that transaction files for this member will no longer be available to the brokerage firm. The firm can make copies of any transaction files prior to the member transfer.

BILLING & PAYMENT DETAILS

Fee Type	Tax	Amount
LCAR Transfer Fee	Exempt	$25
NMAR Transfer Fee	Exempt	$48
MLS Transfer Fee	Included	$11.09
	TOTAL	$84.09

☐ **Charge Card on File** **OR** ☐ **Provide One Time Payment Method**

Name on Card:_____ **Billing Address:**_____
City:_____ **State:**_____ **Zip:** _____

This is a one time authorization to process payments for services rendered. The information below will be shredded.

Credit Card # _____ **Exp:** _____

PAYMENT AUTHORIZATION

I am authorizing LCAR/SNMMLS to charge my credit card the following amount: $84.09.

Signature: _____ **Date:** _____