

REALTOR[®] MEMBERSHIP: New Branch Office



225 PARK AVE, 4TH FLOOR
WEST SPRINGFIELD, MA 01089
(413) 785-1328

This form is used when a REALTOR[®] member brokerage opens a new office location. Please complete and return completed forms to

Mandy Sherman, mandy@rapv.com

Brokerage Information

Brokerage Legal Name: _____

DBA (if applicable): _____

Designated REALTOR[®] / Broker of Record Name: _____ License # _____

DR/Broker Email: _____ Phone: _____

Main Office Street Address: _____

City: _____ State: _____ Zip: _____

NEW Branch Office Information

Office Name (if different from brokerage name): _____

Physical Street Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

Office Phone: _____ Office Email: _____

Branch Office Manager Name: _____

Manager Email: _____ Phone: _____

Number of REALTOR[®] Members Assigned to This Office: _____

Please attach a current list of members in this location

Verification & Authorization

By signing below, I certify that the information provided is accurate and complete to the best of my knowledge. I understand this information will be used to maintain official REALTOR[®] association records.

Managing Broker Signature: _____

Printed Name: _____ Date: _____

Please return the completed form to:

Mandy Sherman, Director of Membership mandy@rapv.com