



12916 168th Avenue Grand Haven, MI 49417 PH: (616)846-6240 Fax: (616) 846-5155

Today's Date _____
Effective date of change _____

RETURN COMPLETED APPLICATION TO INFO@WMLAR.COM

MEMBER TERMINATION FORM

****For use by Designated REALTORS® Only****

The purpose of this form is to report a change in the records of the West Michigan Lakeshore Association of REALTORS® (membership/MLS). It is not to be used in conjunction with the Department of Consumer and Industry Services (licensure).

Changes will not be made if form is submitted incomplete. The incomplete form will be returned for completion to the person/firm that submitted it.

All terminations must be reported by the 25th of ANY month to ensure proper billing of MLS services

NAME _____ SS# ***-**-_____

HOME ADDRESS _____ PO Box _____

CITY _____ STATE _____ ZIP _____

HOME PHONE (____) _____ CELL PHONE (____) _____

EMAIL ADDRESS _____ LICENSE # _____

TERMINATION IN WMLAR RECORDS

*****The DR may still be responsible for outstanding membership dues amounts for non-members, regardless of termination, INCLUDING ACTIVE KEY LEASE & KEYBOXES*****

By completing the following, you are reporting that the above-named individual is no longer licensed with the broker and/or affiliated as an employee or independent contractor, and is not currently transferring to another firm on record with WMLAR, and should be inactivated in WMLAR MLS.

*Please check **at least one** to describe the above-named individual's **LICENSE STATUS**, which may be confirmed with the Department of Licensing and Regulatory Affairs:

Inactive/Sent back to Dept of Licensing and Regulatory Affairs Inactive/Other _____

Active/Transferred to broker who is not on record w/WMLAR Inactive/Other _____

Active/Licensed as an Appraiser, but no longer affiliated as an employee or independent contractor

FIRM NAME/BRANCH _____

DESIGNATED REALTOR® SIGNATURE _____