EAST POLK COUNTY ASSOCIATION OF REALTORS®

700 Ave. B SW, Winter Haven, FL 33880 PH: 863-294-3163 Fax: 863-299-5772

OFFICE ROSTER

Designated Broker Signature **Date** **Office Name**

Address **Email**

Phone **Office NRDS ID** **Office License Number**

**Deadline for receiving these forms is Wednesday, August 21, 2019. Please return the completed forms to the office or email them to membership@epcar.com. Please make us aware of any changes in your office after August 21 and before September 25, making sure to date and initial next to said changes.*

ACTIVE EPCAR MEMBERS

NAME	BROKER	REALTOR	ASSISTANT

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AGENTS IN REFFERAL COMPANY

NAME	BROKER	REALTOR	ASSISTANT

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MEMBERS CURRENTLY ACTIVE TO BE DEACTIVATED

**MUST BE INACTIVE ON DBPR

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NAME AS IT APPEARS ON LICENSE	DATE BROKER INACTIVATED ON DBPR	DATE *STAFF* INACTIVATED MEMBER

OFFICE USE ONLY

Date Received: _____Staff Member Processing Form: _____

Staff Notes if Applicable:_____

_____

_____

Staff Signature(upon completion):_____Date:_____