



KNOXVILLE AREA
ASSOCIATION OF REALTORS

Lockbox Transfer

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To be completed by original holder (Transferor) of lockbox

This is to inform Supra Products, Inc. that _____ wishes to transfer possession of the foregoing lockboxes to the below Transferee. I have verified with the Association/MLS that the Transferee is eligible to have these lockboxes.

Transferor's Signature _____ ID# _____ Date _____

Lockbox #'s (number is on the side of the lockbox)

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To be completed by new holder (Transferee) of lockboxes

As the new responsible owner of such lockboxes, I hereby accept and assume all rights and obligations pursuant to my Supra Products, Inc. Agreement.

Transferee's Name _____ ID# _____

Company Name _____

Telephone Number _____

E-mail _____

Transferee's Signature _____ Date _____

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Please send the completed form to teresa@kaarmls.com.

KAAR signature _____ Date _____