

**GREATER HARRISBURG ASSOCIATION OF REALTORS®-AND**  
**LICENSE CHANGE OF STATUS FORM**

(Copies may be made of this form)

It is extremely important that this form be submitted as soon as a change in status is made. A form MUST be completed for ALL changes. Names will only be removed from a license roster upon receipt of this form. Please note it is illegal for non-members to use the term REALTOR®.

**NOTICE OF LICENSE TERMINATION**

Please be advised that \_\_\_\_\_ is no longer with the firm of \_\_\_\_\_.

Agent License # \_\_\_\_\_ Bright MLS # \_\_\_\_\_ M1/NRDS # \_\_\_\_\_

**The above named individual has (check one):**

- \_\_\_\_\_ Placed license in escrow with the Pennsylvania Real Estate Commission.
  - \_\_\_\_\_ Placed license in Referral and Referral Company name \_\_\_\_\_
  - \_\_\_\_\_ Transferred to a firm outside the Greater Harrisburg Association of REALTORS® membership.
  - \_\_\_\_\_ Transferred to another firm in the Greater Harrisburg Association of REALTORS® membership
- Firm Name and Office Location (if known) \_\_\_\_\_

**NOTICE OF NEW LICENSE\*\*\*\*\*/ TRANSFER OF OFFICE**

Please be advised that \_\_\_\_\_ is a **New Licensee\*\*\*\*\*/Transfer** with

Firm/Office Name \_\_\_\_\_

Office/Branch City \_\_\_\_\_

Agent's email address \_\_\_\_\_ Phone # \_\_\_\_\_

Agent's current home address? \_\_\_\_\_

**The above named individual has (check one):**

- \_\_\_\_\_ Received a new license from the Pennsylvania Real Estate Commission. **(Attach Application Form)\*\*\*\*\***
- \_\_\_\_\_ Removed his/her license from escrow. **(Attach Application Form)\*\*\*\*\***
- \_\_\_\_\_ Transferred from the firm of \_\_\_\_\_

**AN APPLICANT WILL BE GRANTED ACCESS TO THE WWW.GHAR.REALTOR SITE UPON RECEIPT OF THE APPLICATION FORM AND FEE.**

**PLEASE HAVE THE APPLICANT CALL 717-364-3200 TO SET UP A SUPRA EKEY.**

**\*\*\*\*PLEASE SEND THE NEW LICENSEE'S COMPLETED NEW MEMBER APPLICATION FORM WITH THIS FORM.\*\*\*\***

**I certify that the above information is true and accurate to the best of my knowledge.**

\_\_\_\_\_  
Broker of Record or Office Manager

\_\_\_\_\_  
Date

**RETURN PROMPTLY TO:**

Greater Harrisburg Association of REALTORS®  
424 N. Enola Drive, Suite 1, Enola, PA 17025  
Email to: [chris@ghar.realtor](mailto:chris@ghar.realtor)

**Association Use ONLY**

Date Received \_\_\_\_\_  
Date Processed \_\_\_\_\_