



LONGLEAF PINE REALTORS®, INC.

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(910) 323-1421 • FAX (910) 323-0955 • www.longleafpinerealtors.com



LOCKBOX TRANSFER FORM

New Owner: _____ Agent ID: _____

Company: _____ Phone Number: _____

Address: _____
Street City State Zip

New Owner Signature: _____

LockBox Serial No(s) _____ Shackle Code _____

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

This is to certify that I have transferred the right of the use of the listed LockBox(es) to the above new Owner.

Original Owner: _____ Agent ID: _____

Company: _____ Phone Number: _____

Original Owner Signature: _____

Please email or fax completed form to Longleaf Pine REALTORS®, Inc. for immediate transfer to new owner.

Staff Signature: _____ Date: _____