



Transferring Ownership of a Sentrilock LockBox

Lockbox Owner Information

Name: _____

Member ID#: _____ Email Address: _____

Do you give permission to transfer ownership to the below recipient?

Yes No (Must Check Box)

Signature of Lockbox Owner: _____

Please list lockbox serial number(s) below:

Recipient Information

Name: _____

Member ID#: _____ Email Address: _____

Chicago Association of REALTORS®
200 S. Michigan Ave. Ste. 400 Chicago, IL 60604
6017 W. 26th St. Cicero, IL 60804

Please fax this form to 312-803-4905 or email to membership@chicagorealtor.com