



Unleash The Power!

For MetroList Use Only

Member #

Office #

MetroList Services, Inc Keybox Transfer Form

Fax to
your
Service
Center

El Dorado.....(530) 676-0180
Lodi.....(209) 368-8289
MetroList Main Office.....(916) 922-1835
Modesto.....(209) 549-7079
Placer.....(916) 624-8023

Pleasanton.....(925) 730-4931
Sacramento.....(916) 922-1221
Stockton.....(209) 954-4196
Yolo.....(530) 666-7444

Original
Holder of
Keyboxes

This section to be completed by original holder of KeyBoxes

This is to inform MetroList Services, Inc. that _____
Print Current Participant's Name

Lessee/Owner of the following KeyBoxes, wishes to transfer possession of the KeyBoxes to:

Print Name

The KeyBox serial numbers are:

As a condition of this transfer, I shall have paid all sums due MetroList Services, Inc. as of the date of this transfer.

_____/_____/_____
Transferor's Signature Date

New Holder
of Keyboxes

This section to be completed by new holder of KeyBoxes

As the new responsible Lessee/Owner of such KeyBoxes, I hereby accept and assume all rights and obligations pursuant to the MetroList KeyBox System Use and Sublease Agreement*.

**Transferee's
Name**

**Company
Name**

Office Address

City State Zip Code + four

Primary Phone Number Secondary Phone Number
_____-_____-_____-_____-_____-_____

_____/_____/_____
Transferee's Signature Date

**In order to transfer leased KeyBoxes, the new holder (Transferee) must sign a MetroList KeyBox System Use and Sublease Agreement.*

_____/_____/_____
MetroList Authorized Representative Date