MetroList®
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	Pleasanton.....(925) 730-4931
Lodi.....(209) 368-8289	Sacramento.....(916) 922-1221
MetroList Main Office.....(916) 922-1835	Stockton.....(209) 954-4196
Modesto.....(209) 549-7079	Yolo.....(530) 666-7444
Placer.....(916) 624-8023	

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

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