

## **OFFICE INFORMATION FORM**

Revised 11/21/2022

Use this form to change office information or to cancel MLS Property Information Network service for the office. Please complete this form and fax it to (508) 845-2434.

Office Information:	
Name:	MLS ID:
Street Address:	
City:	State: Zip:
Telephone #:	Fax #:
Office Email Address:	
Please Select One of the Following Choices	
☐ Office Information Changed:	
Office Address	
Office Telephone #	
Office Fax #	
☐ Please cancel my office service with MLS Property In	formation Network.
Effective Date:	
☐ Please cancel my office account with MLS Property I ent MLS office #:	<del>_</del>
subscribers) are transferring to.	ned by the principal / manager of the new office you (and any
<ul> <li>Any Active or Under Agreement listings associated with the listings under the new office you (and any subscribers) are to</li> </ul>	office closing down should be Cancelled and re-entered as New ransferring to.
NAME OF PARTICIPANT (PLEASE PRINT)	
SIGNATURE OF PARTICIPANT	

If you have any questions, please call MLS PIN Membership at (800) 695-3000 option 3.