



## OFFICE INFORMATION CHANGE FORM

This form can be used to update/change office physical address, office mailing address, office email address, office phone number or office fax number. Please complete form and fax to MLS at 401-941-5320 or email to Membership at [membership@rirealtors.org](mailto:membership@rirealtors.org). Please allow 24-48 hours for all changes.

**Office Information: (Please fill in your current office information completely)**

Office Name: \_\_\_\_\_ MLS Office ID: \_\_\_\_\_

Current Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Type of Change: (Check all that apply & fill in change(s) to be made)**

New Office (Physical) Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

New Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

New Telephone #: \_\_\_\_\_

New Fax #: \_\_\_\_\_

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PRINT NAME OF PRINCIPAL BROKER/MANAGER

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SIGNATURE OF PRINCIPAL BROKER/MANAGER

DATE