



**EASTERN CONNECTICUT ASSOCIATION OF REALTORS® , INC.**

*The Voice for Real Estate in Eastern Connecticut™*

106 Route 32, Suite 4, North Franklin, CT 06254

Telephone: (860) 892-2595 Fax: (860) 892-2599

Web Site: <http://www.easternctrealtors.com>



## **How do I use the MEMBER UPDATE FORM?**

**SECTION ONE:** **Member or DR/Manager** must complete information in this section. (*Exception: if DR/manager is deleting a member, only the member's name is required.*)

**SECTION TWO:** **Member** completes this section to update his/her information. Select changes to be made, then sign and date the form in this section. Member's DR/Manager may also authorize changes to the member's information.

**SECTION THREE:** **DR/Managers** must complete this section to transfer a member to their firm or to delete a member from their firm. Transfers within a multi-office firm only require a Member Update Form from the adding branch manager.

- ⇒ To transfer a member to your firm, select "transfer member to my firm", state your firm's name and branch address, if applicable. Sign and date the form in this section. You must also submit the CTMLS Member Transfer Form to ECAR.\*
- ⇒ To delete a member from your firm, select "delete member", state your firm's name and branch address, if applicable, and attach a copy of the letter you send to the Real Estate Commission stating that you are no longer sponsoring the member's license. Sign and date the form in this section. You must also submit the CTMLS Member Delete Form to ECAR.\* (*Exception: if you know that the member is transferring to another member broker/firm, ECAR Member Update Form and CTMLS Member Change Form are not required. These forms will be submitted by the adding DR/Manager*)

### **SUBMIT THE MEMBER UPDATE FORM:**

Email: [marylee.maclaren@easternctrealtors.com](mailto:marylee.maclaren@easternctrealtors.com)

Fax: (860) 892-2599

Mailing: Eastern Connecticut Association of REALTORS®, Inc.  
Address 106 Route 32, Suite 4, North Franklin, CT 06254-1800

\*ECAR is your service center and should be your first point of contact for CTMLS!  
All membership applications, transfers, and deletes must be submitted to ECAR.



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**MEMBER UPDATE FORM**

**SECTION ONE – ALL Information Required**

**MEMBER NAME:** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_  
*(Address not published) street city state zip code*

**HOME PHONE:** \_\_\_\_\_ **CELL PHONE:** \_\_\_\_\_  
*(Number not published)*

**EMAIL ADDRESS:** \_\_\_\_\_ **LICENSE #:** \_\_\_\_\_

**SECTION TWO – MEMBER or DR/Manager Authorized Updates**

- \_\_\_ Change email address to email address above.
- \_\_\_ Change cell phone number to number above.
- \_\_\_ Change preferred mail address to: \_\_\_ Office \_\_\_ Home \_\_\_ Other \_\_\_\_\_
- \_\_\_ Change preferred phone: \_\_\_ Office \_\_\_ Cell \_\_\_ Home
- \_\_\_ Change password for member’s access to easternctrealtors.com: \_\_\_\_\_
- \_\_\_ Change password for member’s access to ctmls.mlxchange.com: \_\_\_\_\_
- \_\_\_ Change home address to address above.
- \_\_\_ Change home phone number to number above.
- \_\_\_ Other. Please specify: \_\_\_\_\_

\_\_\_\_\_  
*MEMBER or Designated REALTOR®/Manager Signature*

\_\_\_\_\_  
*Date*

**SECTION THREE – DR/MANAGER AUTHORIZED UPDATES**

- \_\_\_ Transfer member to my firm. **I understand that I may be responsible for any unpaid fees and charges that this member has incurred.** \_\_\_\_\_  
*Firm Name Branch*
- \_\_\_ Delete member. Above agent/member is no longer associated with my firm. **Attach copy of letter sent to Department of Consumer Protection, Real Estate Division, 165 Capitol Avenue, Hartford, CT 06106 (required).**

\_\_\_\_\_  
*Firm Name*

\_\_\_\_\_  
*Branch*

\_\_\_\_\_  
*Designated REALTOR®/Manager Signature*

\_\_\_\_\_  
*Date*

***ECAR is your service center and should be your first point of contact for CTMLS!***