



This form must have the signature of both parties in order to be processed. Please send this form via e-mail to Marsha@GLVR.org.

ORIGINAL Ownership

Please transfer the ownership of the iBox(es) listed below by serial number to the designated NEW owner. By signing this form, I understand that I am relinquishing all ownership rights to the iBox(es).

Name: _____ ORIGINAL Owner Signature: _____ ORIGINAL Owner

LIST OF SERIAL NUMBERS TO BE TRANSFERRED:

NEW Ownership					
By signing this form. Lunde	rstand tha	it I am taking ownership rigi	hts and res	sponsibility of the iBox(es)	
Name:		Signature:			
NEW Owner		NEW Owner	NEW Owner		
Office:		Contact Pho	Contact Phone #:		

Greater Lehigh Valley REALTORS®

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