



# BROKER OF RECORD PROPERTY RELEASE FORM

I, \_\_\_\_\_ of \_\_\_\_\_  
Broker Name (Print or type) Office Name

release this property to \_\_\_\_\_  
Office Name

Listing agent: \_\_\_\_\_

MLS#: \_\_\_\_\_

Property Address: \_\_\_\_\_  
Street number and name

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

Effective Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
Broker of Record for this property Date

**Email form to Carrie Velarde at [Carrie@bridgемls.com](mailto:Carrie@bridgемls.com) or contact Carrie directly at 510-809-4543**

\_\_\_\_\_  
*Office Use Only*

Date: \_\_\_\_\_ Approval Signature: \_\_\_\_\_