

USED LOCK BOX BUY BACK INFORMATION FORM

Please complete this form and return with your lock box(s). Lock boxes will be inspected for good condition. A check will be mailed to you at the address you provide below for approved purchases.

NRDS #:	MLS ID #:	
Mailing Address:		
Telephone Number:	Number of loc	ck boxes being sold:
am requesting SAAR to purchase th	ne following lock box(s) in good o	condition for \$55.00 each.
Serial Number	Shackle Code	For SAAR use only Approved Denied
Please complete an additional sheet	if more space is needed.	
Lagree that it is my responsibility as	the agent to contact SUPRA to	cancel any subscription remaining
I agree that it is my responsibility as	the agent to contact SUPRA to o	cancel any subscription remaining.
Agent Signature	Date:	
Agent Signature	Date:	cancel any subscription remaining.
ockboxes received:	Date:	