

## Section 1: Firm Information

Firm Name: \_\_\_\_\_

Firm Address: \_\_\_\_\_

## Section 2: Agent Information

Agent Full Name: \_\_\_\_\_ NRDS #: \_\_\_\_\_

Home Address: \_\_\_\_\_

Last Known Contact Phone: \_\_\_\_\_

Last Known Contact Email: \_\_\_\_\_

Lic. #: \_\_\_\_\_ Lic. Exp. Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Lic. Type: \_\_\_\_\_

## Section 3: Agent Acknowledgement of Termination

**I am hereby terminating my SVAR membership.**

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

## Section 4: Broker Acknowledgement of Termination

Broker Name: \_\_\_\_\_

Broker Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### For Staff Use Only:

Received by: \_\_\_\_\_ Date: \_\_\_\_\_