SUPRA PRODUCTS
iBOX BT LE TRANSFER

TO BE COMPLETED BY ORIGINAL iBOX OWNER

This is to inform Supra Products that ________________________________________,
(Please print)

owner of iBox number(s) _____________________________________________________
__________________________________________________________________________
__________________________________________________________________________

wishes to transfer the above iBoxes to the below Transferee.

**Please note that any keyboxes starting with a 2 or 5 (older infrared-only models) have been phased out and deleted
from our database and are no longer in use in this market area. BT LE keyboxes that are eligible for transfer start with
'31' or higher.

Owner’s Signature ________________________________________________________
__________________________________________________________________________
R/E License # _____________________________ Date _______________________
__________________________________________________________________________

TO BE COMPLETED BY NEW iBOX BT LE OWNER

Transferee’s Name ________________________________________________________
__________________________________________________________________________
R/E License # _____________________________ Phone# _______________________
Company _________________________________________________________________
Key # _____________________________ Email Address:____________________________

Transferee’s Signature _____________________________________________________
Date _____________________________

OFFICE USE ONLY

Member ID# _______________________________________________________________
Date iBoxes reassigned in KIM _____________________________
Initials __________________

TRANSFEREE MUST BE A KEYHOLDER WITH GAMLS OR FMLS