

**Lockbox Transfer  
Form**



830 Morro Bay Blvd, Morro Bay, CA 93442  
Phone: 805-772-4405 Fax: 805-772-1391  
[www.ScenicCoast.org](http://www.ScenicCoast.org)

**Original Lockbox Owner**

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Company: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**New Lockbox Owner**

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Company: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\_\_\_\_\_ Allow Scenic Coast Association of REALTORS to transfer the  
(Original Owner)  
following SentiLock boxes to \_\_\_\_\_ effective on \_\_\_\_\_.  
(New Owner) (Date)

**Lockbox Serial Numbers**

\_\_\_\_\_  
\_\_\_\_\_

Original Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

New Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_