

TIONS FOR COMPLETING THE BROKER TRANSFER APPLICATON

NOTE: This form is ONLY to be used when a BROKER or BROKER/SALESPERSON licensee is transferring to another responsible broker or to their self. This form is NOT TO BE USED by a salesperson licensee to change brokers.

Part I: For current broker/salesperson – this part is to be signed by your current responsible broker. For current brokers – it is not necessary for you to sign this part to release yourself to transfer to another broker.

Part II Section A: Full Name of Transferring Broker – This is the name of the broker licensee who is transferring. Include your current resident address and phone number. **BE SURE TO COMPLETE THE RESPONSIBLE BROKER LINE AND INCLUDE THE COMPANY NAME (IF APPLICABLE).** Your transfer request CANNOT be processed if MREC does not know who you wish to transfer to, or which company you are transferring to (if the responsible broker has a company license). The CORRECT business address **MUST** be listed or your request CANNOT be processed.

NOTARY SECTION – ONLY SIGN AND NOTARIZE THIS MIDDLE SECTION IF YOU ARE GOING TO BE WORKING AS A BROKER/SALESPERSON UNDER A RESPONSIBLE BROKER. If you are going to be your OWN broker, DO NOT CHECK THE BOX AN DO NOT SIGN THIS SECTION!

Part II Section B: The new responsible broker completes this section, signs, and the signature must be notarized. If you are transferring to yourself, your name should be in both blanks, and you sign accepting responsibility for yourself.

BEFORE MAILING, BE SURE THE FOLLOWING HAVE BEEN ADDRESSED:

- Application **MUST** be typed or printed. If it is printed, be sure handwriting is VERY CLEAR. MREC is not responsible for any misprints due to illegible handwriting.
- **ALL** questions have been answered in their entirety.
- The original wall license is included.
- All continuing education and E & O insurance are up to date.
- The application must be notarized and must be received by MREC within 60 days of the notary date.

Mississippi Real Estate Commission

LeFleur's Bluff Tower, Suite 300 4780 I-55 North, Jackson, MS 39211 OR Post Office Box 12685 Jackson, MS 39236-2685 (601) 321-6970 – Telephone * (601) 321-6955 – Fax

www.mrec.ms.gov

BROKER TRANSFER APPLICATION

(Application will not be accepted unless typed or printed-CLEARLY)

PART I	TERMINATION OF BROKER – BROKER AGREEMENT						
	I h	ereby release(Licensee	(License #)				
		(Signature of Responsible Broker)			(Date)		
PART II	ES	STABLISHMENT OF NEW BROD	KER – BROKER AC	GREEMENT			
	A.	Full Name of Transferring Broker (PRINT)			(Home Phone)		
		Applicants Resident Address	(Nl 0 C()	(Civ.(Starts)	· · · · · · · · · · · · · · · · · · ·		
		Company Name (if applicable)	(Number & Street)	(City/State)	(Zip Code)		
		Business Address		(City/State/Zip)			
	I understand that my original wall license must be returned to the Commission by my former responder before a new license will be issued and I can resume work. I agree not to take ANY listings of pertinent information from my former broker without his/her written authorization/consent and an necessary approvals.					or other y other	
]	request my license be issued to the	will be working in the capacity of broker-salesperson and will not act independently as a broker. I hereby equest my license be issued to the above NEW responsible broker. (Check box if this applies to you.) Transferring Broker's name - printed Signature of Transferring Broker				
		Transferring Broker's name - primea		Signature C	g Transjerring Broker		
		SUBSCRIBED and SWORN to be	efore me, this	day of	, 20		
		My Commission expires					
				(<i>C</i>	ounty) ((State)	
				NOTARY PUBLIC			
		B. I					
			Signature of Responsible Broker				
		Responsible Broker's name - printed SUBSCRIBED and SWORN to be	efore me, this	day of	, 20		
		My Commission expires		(C	ounty) - ((State)	
				NOTARY PUBLIC			
				NOTAKI FUBLIC			