

Mississippi Real Estate Commission

LEFLEUR'S BLUFF TOWER, SUITE 300 4780 I-55 NORTH, JACKSON, MS 39211

P.O. BOX 12685 JACKSON, MS 39236 (601) 321-6970 – Office (601) 321-6955 - Fax www.mrec.ms.gov

AUTHORIZATION TO RELEASE INFORMATION

NAME:			APPLICANT
CURRENT ADDRESS:			
City	State	Zip Code	County
SOCIAL SECURITY #:		DATE OF BIRTH_	
RACE / SEX:		/	
TELEPHONE NUMBER:			
CURRENT E-MAIL ADDRE	ESS:		
As evidenced by my witnesse based background check to:	Mississippi 4780 I-55 N	I hereby authorize and conser i Real Estate Commission North; Suite 300 Iississippi 39211	nt to the release of a fingerprint-
	nation Center, includ	ding, but not limited to, any p	at the possession of or accessible by ast history of a criminal offense(s)
have or may have in the futu Mississippi Department of Pu	are against the State blic Safety and the I ast any/all future a	e of Mississippi, the Mississ Mississippi Justice Informatio actions with reference to the	y for compliance which I may now ippi Real Estate Commission, the on Center, and any of these entities' e release of the above-described
your license will be placed or renewal date, your file will	on ''inactive status' be closed for failin ctivity for which a	" (if active) and if not receiv g to complete the renewal p	nmission by your renewal date, yed within sixty (60) days of your process. If placed "inactive" you red and you then must complete
Signature		Date	<u> </u>
Witness to Signature		Date	